P63000106637

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COVER LETTER

Division of Corporations VMP CORPORATE ENTERPRISES INC. SUBJECT: Name of Corporation P03000106637 DOCUMENT NUMBER:_ The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing. Please return all correspondence concerning this matter to the following: JORGE A. GUANCHE Name of Contact Person VMP CORPORATE ENTERPRISES INC. Firm/Company 7515 S.W. 61 ST Address MIAMI, FL 33143 City/State and Zip Code 305blahblah@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: JORGE A. GUANCHE 979-8717 305 Area Code & Daytime Telephone Number Name of Contact Person Enclosed is a \$35.00 check made payable to the Department of State. **Mailing Address:** Street Address: Amendment Section Amendment Section **Division of Corporations Division of Corporations** P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle

Tallahassee, FL 32301

TO:

Amendment Section

* STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	inge is submitted for a corpora	92, 617.0502, 607.1508, or 617.1508, Florida ation organized under the laws of the State of	FLORIDA	
m orde	• • • • • • • • • • • • • • • • • • • •	ce or registered agent, or both, in the State of PORATE ENTERPRISES INC.	rioriaa.	
1. The name of	the corporation:			
2. The principal	office address:	61 ST, MIAMI, FL 33143	 	
3. The mailing a	SAME Address (if different):	AS ABOVE		
4. Date of incor	9/25/2	2003 Document number: P0300	00106637	-
	rtment of State: (If resigned, e	•	with the	
	OFELIA CAMPOS (RES	SIGNED 9/14/2018)	_	
	1865 BRICKELL AVE #	A1114	-	
	MIAMI, FL 33129		_	
6. The name and (if changed):	d street address of the new reg	istered agent (if changed) and /or registered o	office	
	JORGE A. GUANCHE		·	
	7515 S.W. 61 ST		100 E	1
	MIAMI, FL 33129	PO Box NOT acceptable	(2) (2) (2)	Īī
The street address changed will	ess of its registered office and be identical.	the street address of the business office of	its tegistered ager	nt.
=		uly adopted by its board of directors or by areas been notified in writing of the change.		
(/_	\sim	JORGE A. GUANCHE, PR	RESIDENT	
/ -	re of an officer or director	Printed or typed name and t	itle	
I further agrée performance of agent. Or istin	to comply with the provisions my duties, and I am familiar is do c ument is being filed me	ed agent and agree to act in this capacity, s of all statutes relative to the proper and co with and accept the obligation of my position rely to reflect a change in the registered off, n notified in writing of this change.	on as revistered –	
(/	. X	9/14/2018		
Sig	nature of Registered Agent	Date		
If signing on be	half of an entity:			
<u>_</u>	yped or Printed Name			

* * * FILING FEE: \$35.00 * * *