

PO3000114132

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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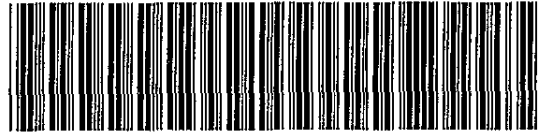
(Business Entity Name)

(Document Number)

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3 9/24/04
NA/NO

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: GDAD Rivera Inc
(Name of corporation)

DOCUMENT NUMBER: P03000114132

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:

Ricardo Rivera
(Name of contact person)

GDAD Rivera Inc.
(Firm/Company)

6809 Longmeade LN
(Address)

Orlando FL 32822
(City/state and zip code)

For further information concerning this matter, please call:

Ricardo Rivera at (407-) 297-6907
(Name of contact person) (Area code & day time telephone number)

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
409 E. Gaines Street
Tallahassee, FL 32399

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

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this
statement of change is submitted for a corporation organized under the laws of the State of Florida
in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: G.D.A.D. Rivera, Inc.
2. The principal office address: 6809 Long Meade Lane
Orlando FL 32822
3. The mailing address (if different): _____

4. Date of incorporation/qualification: 10/9/03 Document number: P03000114132
5. The name and street address of the current registered agent and registered office on file with the
Florida Department of State:

David Castillo - All Alliance Ins.
515 No. Semoran Blvd
Orlando FL 32802

6. The name and street address of the new registered agent (if changed) and /or registered office
(if changed):

Ricardo Rivera
6809 Long Meade Ln.
(P.O. Box NOT acceptable)
Orlando FL 32822

DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

04 SEP 17 AM 10:22

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The street address of its registered office and the street address of the business office of its registered agent,
as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so
authorized by the board, or the corporation has been notified in writing of the change.

(Signature of an officer or director)

(Printed or typed name and title)

I hereby accept the appointment as registered agent and agree to act in this capacity.
I further agree to comply with the provisions of all statutes relative to the proper and complete performance
of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this
document is being filed merely to reflect a change in the registered office address, I hereby confirm that the
corporation has been notified in writing of this change.


(Signature of Registered Agent)

9/14/04
(Date)

If signing on behalf of an entity:

Ricardo Rivera
(Typed or Printed Name)

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314