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TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 5, 2011

NELLY CLAVELL
A.B.C. POWER FIRE & SAFETY EQUIPMENT
12830 SW 105 TERR
MIAMI, FL 33186

SUBJECT: A.B.C. POWER FIRE & SAFETY EQUIPMENT COMPANY
Ref. Number: P04000019819

We have received your document for A.B.C. POWER FIRE & SAFETY EQUIPMENT COMPANY and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing a computer printout which reflects the registered agent and registered office now on file with this office. Please amend your document accordingly.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6892.

Tina Roberts
Regulatory Specialist II

Letter Number: 311A00008256

RECEIVED
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TALLAHASSEE, FLORIDA

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: A.B.C. POWER FIRE & Safety Equipment Company
Name of Corporation

DOCUMENT NUMBER: P04000019819

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:

Nelly Clavell
Name of Contact Person

A.B.C. POWER FIRE & Safety Equipment Company
Firm/Company

12830 SW 105 terrace
Address

Miami, FL 33186
City/State and Zip Code

abcpowerfire@aol.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Nelly Clavell at 786, 443-5009
Name of Contact Person Area Code & Daytime 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
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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

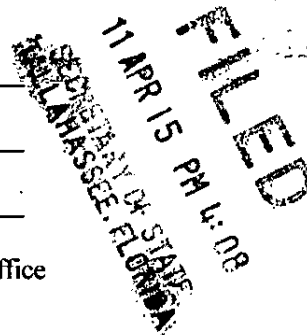
Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: A.B.C. Power Fire & Safety Equipment Company
2. The principal office address: 12830 SW 105 TERRACE
Miami FL 33186
3. The mailing address (if different): S/A

4. Date of incorporation/qualification: 01/27/2004 Document number: P04000019819

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

Carlos Gonzalez-Clavell
21900 SW 124 AVE
Miami, FL 33170



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

12830 SW 105 terrace
Miami, FL 33186

P.O. Box NOT acceptable

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]
Signature of an officer or director

Nelly Clavell
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]
Signature of Registered Agent

3/29/11
Date

If signing on behalf of an entity:

CARLOS Gonzalez Clavell
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