

P04000139321

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**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

Zapata Consulting, INC.

**SUBJECT:** \_\_\_\_\_  
Name of Corporation

P04000139321

**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:

Thais Asper

\_\_\_\_\_  
Name of Contact Person

Zapata Consulting

\_\_\_\_\_  
Firm/Company

PO Box 143751

\_\_\_\_\_  
Address

Coral Gables, FL 33114

\_\_\_\_\_  
City/State and Zip Code

jczapata@aol.com

\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Thais Asper

786 4579636

\_\_\_\_\_  
Name of Contact Person at ( ) \_\_\_\_\_  
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

**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: Zapata Consulting, INC.  
2. The principal office address: 503 NW 136 PL Miami, FL 33182

3. The mailing address (if different): PO Box 143751 Coral Gables, FL 33114

4. Date of incorporation/qualification: 10/07/2004 Document number: P04000139321

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)

Juan C. Zapata  
12925 SW 88 LN  
Miami, FL 33186

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

Carlos Trueba  
1985 NW 88th Ct #101, Doral, FL 33172  
P.O. Box NOT acceptable

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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]  
Signature of an officer or director

Juan C. Zapata  
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

8/25/15  
Date

If signing on behalf of an entity:

Carlos Trueba  
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