

PO5000044/54

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(Requestor's Name)

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(City/State/Zip/Phone #)

☐ PICK-UP    ☐ WAIT    ☐ MAIL

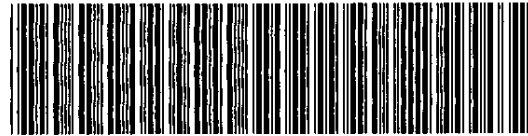
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

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TALLAHASSEE, FLORIDA

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FLORIDA DEPARTMENT OF STATE  
Division of Corporations

August 4, 2011

CIRIA RINCON  
EPOCA OVERSEAS CORP  
7450 DR PHILLIPS BLVD UNIT 312  
ORLANDO, FL 32819

SUBJECT: EPOCA OVERSEAS, CORP.  
Ref. Number: P05000044154

We have received your document for EPOCA OVERSEAS, CORP. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

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: 311A00018414

VED  
AM 10:58  
DIV OF CORP  
STATE, FLORIDA

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Epoca Overseas Corp  
Name of Corporation

**DOCUMENT NUMBER:** 705000044154

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:

CIRIA RINCON  
Name of Contact Person

Epoca Overseas Corp  
Firm/Company

7450 Dr Phillips Blvd Unit 312  
Address

Orlando, FL 32819  
City/State and Zip Code

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

For further information concerning this matter, please call:

CIRIA RINCON at (407) 949 2858  
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: Epoca Overseas, Corp.  
2. The principal office address: 7450 DR. Phillips Blvd Unit 312  
Orlando FL 32819  
3. The mailing address (if different): \_\_\_\_\_

4. Date of incorporation/qualification: 03/23/2005 Document number: POS000044154

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)

CIRIA RINCON  
7178 Regina Way  
Orlando, FL 32819

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

CIRIA RINCON  
7450 DR Phillips Blvd Unit 312  
Orlando, FL 32819

P.O. Box NOT acceptable

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TALLAHASSEE, FLORIDA

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.

Ciria E Rincon V  
Signature of an officer or director

CIRIA RINCON President  
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.

Ciria E Rincon V  
Signature of Registered Agent

07/30/2011  
Date

If signing on behalf of an entity:

Ciria RINCON  
Typed or Printed Name

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