P05000127392

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COVER LETTER

TO: Amendment Section Division of Corporations		
SUBJECT: Service & Help Corp. Name of Corporation		
DOCUMENT NUMBER: P05000127392		
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:		
Borban G Povedw		
Name of Contact Person		
Name of Contact Person Service & Help Corp Firm/Company		
Firm/Company		
5700 Hemorial Havy Ste 116		
Tampa PL 33615 City/State and Zip Code		
City/State and Zip Code		
E-mail address: (to be used for future annual report notification)		
E-mail address: (to be used for future annual report notification)		
For further information concerning this matter, please call:		
$\mathcal{A} \cup \mathcal{A} \cup \mathcal{A} \cup \mathcal{A}$		
Barbaro G Poveda at (813) 326 - 2951 Name of Contact Person Area Code & Daytime Telephone Number		
Name of Contact Person Area Code & Daytime Telephone Number		
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 32301

2661 Executive Center Circle

Tallahassee, FL 32314

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: Service & Help Corp.
2. The principal office address: 5700 Hemorial Hwy Ste 116
Tampa PL 336150
3. The mailing address (if different): Po Box 262065
Tampa FL 33685 - 2065
4. Date of incorporation/qualification: 09/15/2015 Document number: P05000127392
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) Service & Helb Corb
6 72
5700 Hemorial Havy ste 116 7
Tampa FL 33615
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed): Service & Help Corp / Barbarob. Potrecta
7710 Springside La
Tampa PL 33615
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, of the corporation has been notified in writing of the change.
Barbaro G Poveda President Signature of an original 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.
02/15/2016
Signature of Registered Agent Date
If signing on behalf of an entity:
Barbaro G. Poveda Typed or Printed Name

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