

## Florida Department of State

Division of Corporations **Electronic Filing Cover Sheet** 



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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 : (307)200-2803 Phone Fax Number : (855)330-1010

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Email Address:\_\_\_\_\_

## REGISTERED AGENT CHANGE NEPTUNO CORP. III

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Page Count	02
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## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	inge is submitted for a corporation	17.0502, 607.1508, or 617.1508, Florida Stat organized under the laws of the State of Flor	rida	is	
		registered agent, or both, in the State of Flor	rida.		
	the corporation: NEPTUNO CC				
2. The principal	office address: 8950 SW 74th	COURT Suite 1210 MIAMI, FL 33156	6		
3. The mailing a	address (if different):				_
4. Date of incor	poration/qualification: 11/15/05	Document number: P0500015	52435		_
	d street address of the current regis	tered agent and registered office on file with tresigned)	the		
	CIRIACO SANCHEZ, S	Sr			
8950 SW 74th COURT Suite 1210					
	MIAMI, FL 33156		60	2(	
6. The name and street address of the new registered agent (if changed) and /or registered off (if changed):		ECRETA	2022 APR -6	222 1231	
	Registered Agents Inc.	· · · · · · · · · · · · · · · · · · ·	15.5 15.5 15.5 15.5 15.5 15.5 15.5 15.5		
	7901 4th St N STE 300		SEE'S	AM 6	
	St. Petersburg FL 3370	P.O. Box NOT acceptable	FIL	6: 40	
The street address changed will	ess of its registered office and the	street address of the business office of its re	egistere	d agent,	
		dopted by its board of directors or by an off een notified in writing of the change.			
CIRIO SI	MM MMHQ CIRIACO SANCHEZ, P		TD		
I hereby accept I further agree of my duties, an document is bei	the appointment as registered ag to comply with the provisions of a id I am familiar with and accept t ing filed merely to reflect a chang s been notified in writing of this c	Printed or typed name and title tent and agree to act in this capacity, all statutes relative to the proper and comple he obligation of my position as registered age in the registered office address, I hereby change.	zie perfo gent. O onfirm	ormance or if this that the	?
Bei H 04/06/2022		04/06/2022			
Sig	nature of Registered Agent	Date			
If signing on bo	half of an entity:				
Bill Havre					
Т	yped or Printed Name				

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