

P06000026701

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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WAIT

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MAIL

(Business Entity Name)

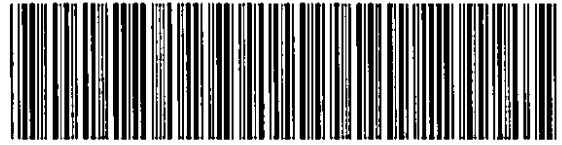
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SECRETARY OF STATE
TALLAHASSEE, FL

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12-13 2018

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Central FL Business Group Inc
Name of Corporation

DOCUMENT NUMBER: P06000026701

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:

chris gutierrez

Name of Contact Person

central fl business group, inc

Firm/Company

454 w pipkin rd

Address

Lakeland FL 33813

City/State and Zip Code

chris@flbusinesssales.com

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

For further information concerning this matter, please call:

Chris Gutierrez

Name of Contact Person

at (863) 226-4107

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: Central FL Business Group, Inc
2. The principal office address: 454 W. Pipkin Rd, Lakeland FL 33813 (new)
3. The mailing address (if different): 4798 S FLORIDA AVE, #169, LAKELAND FL 33813
4. Date of incorporation/qualification: 02/22/2006 Document number: P06000026701

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)

CHRISTOPHER A GUTIERREZ

4175 S. PIPKIN RD, SUITE 207

LAKELAND FL 33811

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

CHRISTOPHER A GUTIERREZ

454 W. PIPKIN RD

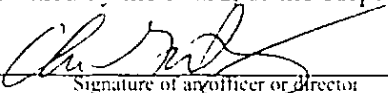
P.O. Box NOT acceptable

LAKELAND FL 33813

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TALLAHASSEE, FL

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

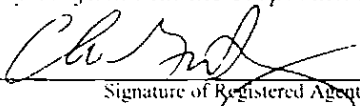
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.


Signature of an officer or director

Chris Gutierrez

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 of Registered Agent

11-29-18
Date

If signing on behalf of an entity:

Chris Gutierrez

Typed or Printed Name

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