

PO6 0000060880

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

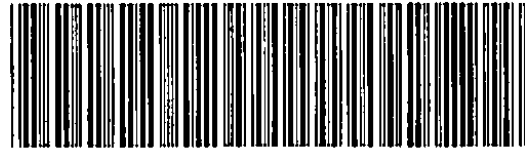
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



000343898820

05/04/20--01037--020

2020 MAY 11 9 11 AM

AM
5/22/20

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: all pro plumbing septic and sewer inc
Name of Corporation

DOCUMENT NUMBER: P06000060880

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:

barry teixeira

Name of Contact Person

all pro plumbing septic and sewer inc

Firm/Company

2199 nw 22 ave

Address

miami.florida 33142

City/State and Zip Code

allpross@bellsouth.net

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

For further information concerning this matter, please call:

barry teixeira

Name of Contact Person

at (305) 635-3002

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
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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: all pro plumbing septic and sewer inc

2. The principal office address: 2199 nw 22 ave unit 7-B miami, florida 33142

3. The mailing address (if different): _____

4. Date of incorporation/qualification: april 28, 2006 Document number: P06000060880

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)

tontavia i kemp(resigned)

2199 nw 22 ave unit 7-B

miami, florida 33142

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

barry g teixeira

2199 nw 22 ave unit 7-B

P.O. Box NOT acceptable

miami, florida 33142

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.

Beet

Signature of an officer or director

barry g teixeira 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 perform of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if document is being filed merely to reflect a change in the registered office address, I hereby confirm that corporation has been notified in writing of this change.

Beet

Signature of Registered Agent

04-27-2020

Date

If signing on behalf of an entity:

barry g teixeira

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
CR2E045 (04/13)