

PO6000136497

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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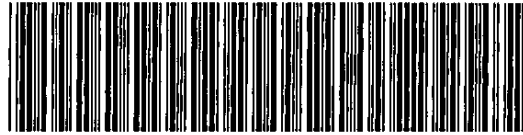
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: AG Space Construction, Inc  
(Name of Corporation)

DOCUMENT NUMBER: P06000136497

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:

Guillermo Caceres  
(Name of Contact Person)

What A Refund, Inc  
(Firm/Company)

8200 W 33<sup>RD</sup> AVE, Suite 15  
(Address)

Hialeah, FL 33018  
(City/State and Zip Code)

For further information concerning this matter, please call:

Guillermo Caceres at (305) 819-9044  
(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

RECEIVED  
07 FEB 22 AM 8:00  
DIVISION OF CORPORATIONS



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

January 18, 2007

GUILLERMO GONZALEZ  
AG SPACE CONSTRUCTION.INC  
21 NW 66 AVE  
MIAMI, FL 33126

SUBJECT: AG SPACE CONSTRUCTION.INC  
Ref. Number: P06000136497

We have received your document for AG SPACE CONSTRUCTION.INC and check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The wrong form was submitted. You sent the form Articles of Amendment to Articles of Organization for a Florida limited liability company. The entity was originally filed as a Florida Profit corporation.

We are enclosing the proper form with instructions for your convenience.

Please note the filing fee is \$35.00, a balance of \$10.00 is due when the corrected document is returned.

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) 245-6905.

Thelma Lewis  
Document Specialist Supervisor

Letter Number: 607A00004071

**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: A B Space Construction, Inc  
2. The principal office address: 21 NW 66 AVE  
Miami, FL 33126  
3. The mailing address (if different): \_\_\_\_\_

4. Date of incorporation/qualification: 10/25/2006 Document number: P06000136497

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

Luz M. DE Armas  
8790 Tolt Street  
Pembroke Pines, FL 33024

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TALLAHASSEE, FLORIDA

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

What A Refund, Inc / Guillermo Caceres  
8200 W. 33RD AVE, Suite 15  
(P.O. Box NOT acceptable)  
Hialeah, FL 33018

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.

Guillermo Gonzalez  
(Signature of an officer or director)

Guillermo Gonzalez  
(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.

Guillermo Caceres  
(Signature of Registered Agent)

2/20/07  
(Date)

If signing on behalf of an entity:

Guillermo CACERES  
(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