

PD80000059035

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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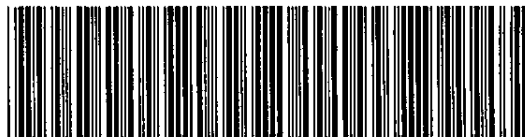
(Business Entity Name)

(Document Number)

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DIVISION OF CORPORATIONS  
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## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** FRANK COTO DETECTIVE AGENCY INC.  
Name of Corporation

**DOCUMENT NUMBER:** P08000059035

Please return all correspondence concerning this matter to the following:

Frank Coto

Name of Contact Person

Frank Coto Detective Agency Inc.

Firm/Company

1811- Laurel Oak Drive

Address

Valrico, Florida 33596

City/State and Zip Code

sherlockcoto@yahoo.com

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

For further information concerning this matter, please call:

Frank Coto

Name of Contact Person

at (813) 629-1944

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

☐ \$35.00 Filing Fee

☐ \$43.75 Filing Fee & Certificate of Status

☐ \$43.75 Filing Fee & Certified Copy

☐ \$52.50 Filing Fee, Certificate of Status & Certified Copy

**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: Frank Coto Detective Agency Inc.

2. The principal office address: 1811- Laurel Oak Drive Valrico, Florida 33596

3. The mailing address (if different): \_\_\_\_\_

4. Date of incorporation/qualification: 06/18/08 Document number: P08000059035

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)

Frank Coto

5912- East Columbus Drive

Tampa, Florida 33619

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

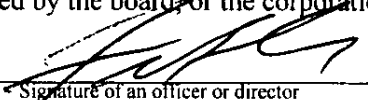
SAME

1811- Laurel Oak Drive

Valrico, Florida 33596 P.O. Box NOT acceptable

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

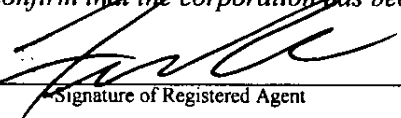
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

  
\_\_\_\_\_  
Signature of an officer or director

Frank Coto , 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 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

07/30/15

\_\_\_\_\_  
Date

If signing on behalf of an entity:

Frank Coto

\_\_\_\_\_  
Typed or Printed Name

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

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