

P09 000007039

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

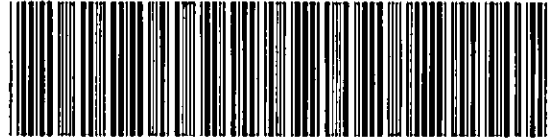
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



300357487523

01/12/21--01012--004 **35.00

2021 JAN 13 PM 11:15

RECEIVED

FEB 10 2021

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: The Talent Source Inc
Name of Corporation

DOCUMENT NUMBER: PO 900000 7039

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:

Claire Marrero
Name of Contact Person
The Talent Source Inc
Firm/Company
3845 W Hibiscus St
Address
Weston FL 33332
City/State and Zip Code

clairemarrero@thetalentsource.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Claire Marrero at (305) 812 0574
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
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.

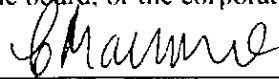
1. The name of the corporation: The Talent Source Inc
2. The principal office address: 2645 Executive Park Dr # 645
Weston FL 33331
3. The mailing address (if different): 3845 W Hibiscus St Weston FL 33332
4. Date of incorporation/qualification: 1/22/2009 Document number: PO9000007039
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)
Maikel Marvero
1535 Northpark Dr, Suite 102
Weston FL 33326

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

Maikel Marvero
3845 W Hibiscus St
Weston FL 33332
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

Claire Marvero 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

1/8/2021
Date

If signing on behalf of an entity:

Maikel Marvero
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)