

PO9000027032

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

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RA  
Change

04/10/09--01017--022 \*\*35.00

FILED  
2009 APR 20 AM 8:13  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

ASR  
4/21/09

\*00789, 00709, 00614, 00671



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

April 13, 2009

Ariel Ortega  
Maritza Seafood Inc.  
1366 E. 4th Ave.  
Hialeah, FL 33010

SUBJECT: MARITZA SEAFOOD, INC.  
Ref. Number: P09000027032

We have received your document for MARITZA SEAFOOD, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing a computer printout which reflects the registered agent and registered office now on file with this office. Please amend your document accordingly.

A business entity may not serve as its own registered agent. Please designate an individual or another business entity with an active registration or filing with this office, having a Florida street address identical with that of the registered office.

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) 245-6907.

Annette Ramsey  
Regulatory Specialist II

Letter Number: 509A00012352

RECEIVED  
2009 APR 20 AM 8:00  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Maritza Seafood ■  
(Name of Corporation)

**DOCUMENT NUMBER:** \_\_\_\_\_

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:

Ariel ortega -  
(Name of Contact Person)

Maritza seafood  
(Firm/Company)

1366 e 4th ave  
(Address)

hialeah fl, 33010  
(City/State and Zip Code)

For further information concerning this matter, please call:

Ariel ortega at ( 305 ) 885-8210  
(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

**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 \_\_\_\_\_ in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Maritza Seafood, Inc.
2. The principal office address: 1366 e 4th ave hialeah fl,33010
3. The mailing address (if different): \_\_\_\_\_
4. Date of incorporation/qualification: \_\_\_\_\_ Document number: \_\_\_\_\_
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)

carlos Gonzalez

1354 -1366 e 4th ave fl,33010

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

Ariel Ortega

1366 e 4th ave hialeah fl,33010

(P.O. Box NOT acceptable)

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2009 APR 20 AM 8:13

FILED

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]  
(Signature of an officer or director)

Maritza gonzalez(owner)  
(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]  
(Signature of Registered Agent)

04/17/2009  
(Date)

If signing on behalf of an entity:

Ariel ortega  
(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 (8/05)