

PD9000070019

(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



200215006222

12/12/11--01043--009 **35.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
11 DEC 12 PM 4:37

Bo/chs
10/2/13/11

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: MONTEMAYOR PROPERTIES CORP.
Name of Corporation

DOCUMENT NUMBER: P09000070019

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:

Kareem Schiebeck
Name of Contact Person

Firm/Company

3232 Coral Way, Unit 1310
Address

Miami, FL 33145
City/State and Zip Code

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

For further information concerning this matter, please call:

Kareem Schiebeck at () 386 760 0832
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 FL in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: MONTEMAYOR PROPERTIES CORP.
2. The principal office address: 3232 Coral Way # 1310
Miami, FL 33145
3. The mailing address (if different): _____

4. Date of incorporation/qualification: 8/20/09 Document number: P09000070019

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)

Kareem Schiebeck

5808 Camelot Ct

Port Orange, FL 32127

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

KAREEM SCHIEBECK

3232 CORAL WAY UNIT 1310

P.O. Box NOT acceptable

MIAMI FL 33145

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.

Kareem Schiebeck
Signature of an officer or director

Kareem Schiebeck
Attorney in fact
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.

Kareem Schiebeck
Signature of Registered Agent

8/26/11
Date

If signing on behalf of an entity:

Kareem Schiebeck,
Typed or Printed Name

Registered Agent
Attorney in fact

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE

MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

CR2F045 (8/05)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
11 DEC 12 PM 4:38