

P100000016323

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

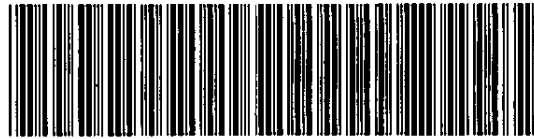
(Document Number)

Certified Copies \_\_\_\_\_

Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



900172972289

03/29/10--01021--003 \*\*35.00

FILED  
10 MAR 29 AM 11:22  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2010/03/29  
TC

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** BEST CONCRETE PRODUCTS, CORP.  
Name of Corporation

**DOCUMENT NUMBER:** P10000016323

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:

MANUEL AREVALO  
Name of Contact Person

BEST CONCRETE PRODUCTS, CORP.  
Firm/Company

8450 NW 61ST STREET  
Address

MIAMI, FL 33166  
City/State and Zip Code

serg277@bellsouth.net  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

MANUEL AREVALO at ( 786 ) 286-0162  
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 FLORIDA in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: BEST CONCRETE PRODUCTS, CORP.
2. The principal office address: 8430 NW 61ST STREET, MIAMI, FL 33166
3. The mailing address (if different): SAME AS ABOVE
4. Date of incorporation/qualification: 02/23/2010 Document number: P10000016323
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)

MANUEL AREVALO

8430 NW 61ST STREET

MIAMI, FL 33166

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

MANUEL AREVALO

8450 NW 61ST STREET

P.O. Box NOT acceptable

MIAMI, FL 33166

FILED  
10 MAR 29 AM 11:22  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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.

X [Signature]  
Signature of an officer or director

MANUEL AREVALO  
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.*

X [Signature]  
Signature of Registered Agent

03/23/2010  
Date

If signing on behalf of an entity:

MANUEL AREVALO  
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)