

P10000042958

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

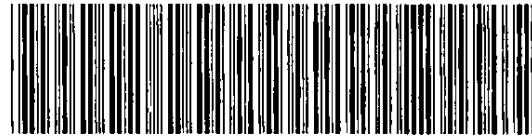
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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JUN 20 2017

T. LEONEUX

AKC

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: AMI AGENCY INC
Name of Corporation

DOCUMENT NUMBER: P10000042958

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:

JEROME COOPER

Name of Contact Person

AMI AGENCY INC

Firm/Company

1051 SAMPLE RD

Address

POMPANO BEACH, FL 33064

City/State and Zip Code

MAPLESINS@AOL.COM

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

For further information concerning this matter, please call:

JEROME COOPER

Name of Contact Person

at (**954**) **9468940**

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: AMI AGENCY INC
2. The principal office address: 1051 E SAMPLE RD, POMPANO BEACH, FL 33064

3. The mailing address (if different): _____

4. Date of incorporation qualification: 03/10/2010 Document number: P10000042958

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)

JEFF CINTRON

11531 NW 29TH ST

SUNRISE, FL 33323

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

JEROME COOPER

9681 MILL POND DR

P.O. Box NOT acceptable

MIRAMAR, FL 33025

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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

JEROME COOPER, CEO

Printed or typed name and title

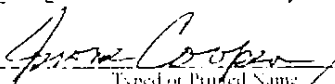
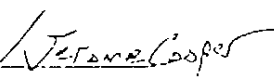
I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if 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

06/07/2017

Date

If signing on behalf of an entity:

 / 
Typed or Printed Name

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