

PI 0000050598

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

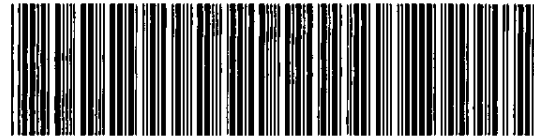
(Document Number)

Certified Copies _____

Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



500190764915

01/10/11--01048--030 **35.00

FILED
11 JAN 10 AM 10:02
SECRETARY OF STATE
TALLAHASSEE, FL 32310

RA Change

01-13-11

De

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: PRIVATE INVESTIGATIONS FWO, INC.
Name of Corporation

DOCUMENT NUMBER: P100000 50598

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:

Maritza Delgado
Name of Contact Person

Private Investigations FWO, Inc.
Firm/Company

1825 Ponce de Leon Blvd., # 165
Address

Coral Gables, FL 33134
City/State and Zip Code

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

For further information concerning this matter, please call:

Maritza Delgado at (786) 231-4870
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: PRIVATE INVESTIGATIONS FOR WOMEN ONLY, INC
2. The principal office address: 1825 Ponce de Leon Blvd., #165
Coral Gables, FL 33134
3. The mailing address (if different): _____

4. Date of incorporation/qualification: 6/15, 2010 Document number: P100000 50598

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)

Lance
~~Maritza~~ Delgado

782 N.W. 42nd Ave., Suite # 343

Miami, FL 33126

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

Lance Delgado

1825 Ponce de Leon Blvd., #165

P.O. Box NOT acceptable

Coral Gables, FL 33134

FILED
11 JAN 10 AM 10:02
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.

Maritza Delgado
Signature of an officer or director

Maritza Delgado
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.

Lance Delgado
Signature of Registered Agent

1/4/2011
Date

If signing on behalf of an entity:

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)