

P100000076175

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

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MAIL

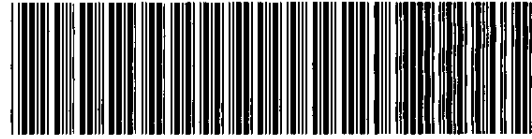
(Business Entity Name)

(Document Number)

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DIVISION OF CORPORATIONS
11 MAR 11 PM 2:31

Rd/chs
10 3/11/11

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: MARIANO A/C Refrigeration, Inc.
Name of Corporation

DOCUMENT NUMBER: P10000076175

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:

Alberto MARIANO
Name of Contact Person

MARIANO A/C Refrigeration, Inc.
Firm/Company

3801 W. TYSON Avenue Apt. 102
Address

TAMPA, FL 33611
City/State and Zip Code

Alberto-HVAC@yahoo.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Alberto MARIANO at (813) 326-1145
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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 10, 2010

ALBERTO MARIANO
MARIANO A/C REFRIGERATION, INC.
3801 W. TYSON AVENUE - APT. 102
TAMPA, FL 33611

SUBJECT: MARIANO A/C REFRIGERATION, INC.
Ref. Number: P10000076175

We have received your document for MARIANO A/C REFRIGERATION, 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.

YOU FAILED TO LIST THE CURRENT AND NEW REGISTERED AGENT ON THE DOCUMENT IN PART 5(FIVE) AND 6(SIX) OF THE FORM.

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) 245-6964.

Irene Albritton
Regulatory Specialist II

Letter Number: 110A00028697

RECEIVED
11 MAR 11 AM 9:15
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 14, 2011

ALBERTO MARIANO 2ND MAILING
MARIANO A/C REFRIGERATION, INC.
7323 WINCHESTER DRIVE
TAMPA, FL 33615

SUBJECT: MARIANO A/C REFRIGERATION, INC.
Ref. Number: P10000076175

We have received your document for MARIANO A/C REFRIGERATION, 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):

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Irene Albritton
Regulatory Specialist II

Letter Number: 110A00028697

**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: MARIANO A/C Refrigeration, INC.
2. The principal office address: 7323 Winchester Dr
Tampa, FL 33615
3. The mailing address (if different): _____

4. Date of incorporation/qualification: 9-16-10 Document number: P100000076175

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)

7323 Winchester Drive
TAMPA, FL 33615
MARIANO, Alberto

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

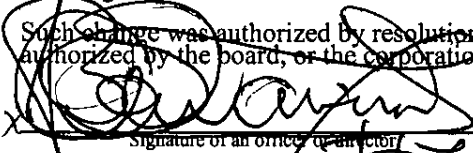
3801 W. TYSON Avenue Apt. 102
TAMPA, FL 33611
MARIANO, Alberto

P.O. Box NOT acceptable

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DIVISION OF CORPORATIONS
11 MAR 11 PM 2:31

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

ALBERTO MARIANO

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

12/3/10

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