P11000003973

<u> </u>	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:				
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SELING JARY OF STATE OF STATE OF CORRORATION OF COR

COVER LETTER

TO: Amendment Division of	nt Section f Corporations	
SUBJECT:	Y. GONZALEZ C.P	A., P.A.
	Name of Corp	poration $=$ $=$ $=$
DOCUMENT NU	MBER: P1100	0003973
The enclosed State	ment of Change of Registered Office/A	Agent and fee are submitted for filing.
Please return all co	rrespondence concerning this matter to	A., P.A. poration 00003973 Agent and fee are submitted for filing. the following:
	Name of Conta	ct Person
	Name of Comu	or r Gradin
	Firm/Com	oan y
	Addres	S
	City/State and	Zip Code
	documents@ind	corp.com
-	E-mail address: (to be used for futu	re annual report notification)
For further informa	ation concerning this matter, please cal	l:
	on behalf of	at ()
Nar	ne of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a \$35.0	0 check made payable to the Departme	ent of State.
	Mailing Address: Amendment Section	Street Address: Amendment Section
	Division of Corporations	Division of Corporations
	P.O. Box 6327	Clifton Building
	Tallahassee, FL 32314	2661 Executive Center Circle

Tallahassee, FL 32301

TO:

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, Florestatement of change is submitted for a corporation organized under the laws of the Sta	
in order to change its registered office or registered agent, or both, in the Sta	
1. The name of the corporation: Y. GONZALEZ C.P.A., P.A.	
13876 SW 56 Street Ste #120	
Miami El 33175	
3. The mailing address (if different):	
4. Date of incorporation/qualification: 01/12/2011 Document number:	P11000003973
5. The name and street address of the current registered agent and registered office on it Florida Department of State: (If resigned, enter resigned)	file with the
GONZALEZ, YANTE	
13876 Sw 56 Street · Ste#120	
Miami, FL 33175	
6. The name and street address of the new registered agent (if changed) and /or register (if changed):	ed office
InCorp Services, Inc.	3 3 4 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5
17888 67th Court North	MAY
P.O. Box NOT acceptable	
Loxahatchee, FL 33470	
The street address of its registered office and the street address of the business office as changed will be identical.	of its registered agent,
Such change was authorized by resolution duly adopted by its board of directors or bauthorized by the board, or the corporation has been notified in writing of the change	by an officer so
Signature of an officer or director ANTE GOT Printed or typed name	vzc bz. Presiden t
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 performance of my duties, and I am familiar with and accept the obligation of my po agent. Or, if this document is being filed merely to reflect a change in the registered hereby confirm that the corporation has been notified in writing of this change.	, d complete sition as registered l office address, I
April 27, 2	017
Signature of Registered Agent Date If segning on behalf of an entity:	
Upsie A Sorensen on behalf of InCorp Services, Inc.	
* * * 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 (03/12)