

P11000013634

(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



500204052425

04/26/11--01002--005 **35.00

FILED
11 APR 26 AM 9:55
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Handwritten signature: *Handwritten signature*
5/20/11

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: AGRESSIVE ACCOUNTING SERVICES, INC.
Name of Corporation

DOCUMENT NUMBER: P11000013634

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:

ANA R GAUD
Name of Contact Person

AGRESSIVE ACCOUNTING SERVICES, INC.
Firm/Company

274 WILSHIRE BLVD. SUITE 245
Address

CASSELBERRY, FL 32707
City/State and Zip Code

nrc800@yahoo.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

ANA R GAUD at (407) 953-8774
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: AGGRESSIVE ACCOUNTING SERVICES, INC.
2. The principal office address: 274 WILSHIRE BLVD. SUITE 245
CASSELBERRY, FL 32707
3. The mailing address (if different): SAME
4. Date of incorporation/qualification: 02/08/2011 Document number: P11000013634
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)

CLARISSA OBREGON

1621 FREDRIKA DRIVE

ORLANDO, FLORIDA 32812

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

DAHANA ORTIZ

4425 WILL CREEK DRIVE APT.

P.O. Box NOT acceptable

WINTER SPRINGS, FLORIDA 32708

FILED
11 APR 26 AM 9:55
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.

Ana R. Gaud
Signature of an officer or director

ANA R GAUD
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.

Dahana Ortiz
Signature of Registered Agent

04/21/2011
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)