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(Requestor's Name)

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(Business Entity Name)

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S. YOUNG

DEPARTMENT OF STATE
DIVISION OF CORPORATION
TALLAHASSEE, FLORIDA

2020 JAN 10 AM 7:11

FILED

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Blue Horizon Tex Solutions Inc
Name of Corporation

DOCUMENT NUMBER: _____

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:

ABBY KAISER
Name of Contact Person
Blue Horizon Tex Solutions Inc
Firm/Company
6810 Lyons Technology #125
Address
My Coconut Creek Fla 33073
City/State and Zip Code
ABBY@BHTSTAFFING.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

ABBY KAISER at (954) 290 2157
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 FLA
_____ in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Blue Horizon Tek Solutions Inc.
2. The principal office address: 6810 Lyons Tech Circle #125
Cocoa Creek Fla 33073
3. The mailing address (if different): Fed Ex 32-0338808

4. Date of incorporation/qualification: April 2011 Document number: _____

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)

Scott Vengel (Resigned)
7900 Nova Drive # 103
Davie Fla 33324

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

Ben Arundel
101 Nw 3rd Ave # 1500
P.O. Box NOT acceptable
Fort Lauderdale FL 33301

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:

Abbey Kaiser
Signature of an officer or director

ABBY KAISER
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]
Signature of Registered Agent

7-24-19
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 (03/12)

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TALLAHASSEE, FLORIDA