

P11000038246

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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RA  
C. [Signature]  
9-18-12

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** FELMAR STUCCO INC  
Name of Corporation

**DOCUMENT NUMBER:** P11000038246

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:

Augusto Ferreira

Name of Contact Person

Central Florida Forms

Firm/Company

185 S Westmonte Dr. Ste 1216

Address

Altamonte Springs FL 32714

City/State and Zip Code

centralfloridaforms@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Augusto Ferreira

Name of Contact Person

at ( 407 ) 786-6400

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 786-6400 in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Felmar Stucco Inc
2. The principal office address: 814 E. Rich Avenue  
Deland, FL 32724
3. The mailing address (if different): \_\_\_\_\_
4. Date of incorporation/qualification: \_\_\_\_\_ Document number: P11000038246
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)

Felix Delgado

1097 Shady Hollow Dr

Deland, FL 32724

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

Felix Delgado

814 E. Rich Avenue

P.O. Box NOT acceptable

Deland, FL 32724

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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.

Felix Delgado  
Signature of an officer or director

Felix Delgado, President  
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.*

Felix Delgado  
Signature of Registered Agent

09/06/12  
Date

If signing on behalf of an entity:

Felix Delgado

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)