

PI1000056996

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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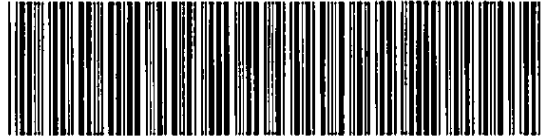
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FL

JQ 10/14/20

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** ZEHIRUT INTERNATIONAL INC  
Name of Corporation

**DOCUMENT NUMBER:** P11000056996

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:

ANTONIO ZAMORA

Name of Contact Person

ZEHIRUT INTERNATIONAL INC

Firm/Company

9485 Sunset Dr. Suite #A-265.

Address

Miami, FL 33173

City/State and Zip Code

nohoratapias@zehirut.com

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

For further information concerning this matter, please call:

NOHORA TAPIAS DIAZ

at ( 786 )

537-9717

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  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

**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 \_\_\_\_\_ in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: ZEHIRUT INTERNATIONAL INC  
2. The principal office address: 14121 SW 47 ST MIAMI FL 33175

3. The mailing address (if different): P.O. Box 942362 Miami, FL 33194

4. Date of incorporation/qualification: 06/20/2011 Document number: P11000056996

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)

Beasley Bryant & Company, Cpa's P.A

4940 Southfork Drive Lakeland, FL 33813

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

ANTONIO ZAMORA

9485 Sunset Dr, Suite #A-265, Miami, FL 33173

P.O. Box NOT acceptable

9485 Sunset Dr, Suite #A-265, Miami, FL 33173

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.

Nohora Tapias  
Signature of an officer or director

NOHORA TAPIAS DIAZ  
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.*

QZ  
Signature of Registered Agent

08/21/2020  
Date

If signing on behalf of an entity:

Antonio Zamora  
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 (04/13)

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