

PH 000 79145

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

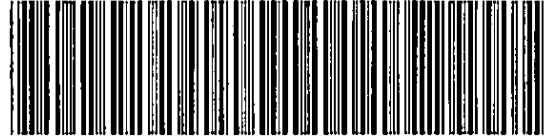
(Business Entity Name)

(Document Number)

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19 OCT 15 PM 6:00

Ra Change

NOV 06 2019

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## COVER LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: Lmp Concrete Pumping Inc  
Name of Corporation

DOCUMENT NUMBER: P11000079145

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:

Leonel Muviz  
Name of Contact Person

Lmp Concrete Pumping  
Firm/Company

11722 SW 168 ter  
Address

Miami, FL 33177  
City/State and Zip Code

Leonelmuviz33@yahoo.com  
E-mail address: (to be used for future annual report notification)

RECEIVED  
DIVISION OF CORPORATIONS  
19 OCT 15 PM 6:00

For further information concerning this matter, please call:

Leonel Muviz at ( 305 ) 878-6881  
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

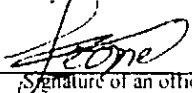
**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR  
BOTH FOR CORPORATIONS**

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

1. The name of the corporation: LMP Concrete Pumping Inc.
2. The principal office address: 11722 SW 168 Ter  
Miami, FL 33177
3. The mailing address (if different): \_\_\_\_\_
4. Date of incorporation/qualification: 9/7/2011 Document number: P 11000079145
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)  
Leonel Muwiz  
15310 SW 306 St, Homestead, FL  
33033
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):  
Leonel Muwiz  
11722 SW 168 Ter  
Miami, FL, 33177


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.

  
Signature of an officer or director

Leonel Muwiz (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.

  
Signature of Registered Agent

10/5/19  
Date

If signing on behalf of an entity:

\_\_\_\_\_  
Typed or Printed Name

\*\*\* FILING FEE: \$35.00 \*\*\*