

PI1000105378

(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



200298054522

04/17/17--01021--008 **35.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
17 APR 17 AM 9:52

APR 19 2017
C McNAIR

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Rainforest Management Inc
Name of Corporation

DOCUMENT NUMBER: P11000105378

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:

Bielman Alarcon
Name of Contact Person

Rainforest Management Inc
Firm/Company

941 E Tropical Way
Address

Plantation FL 33317
City/State and Zip Code

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

For further information concerning this matter, please call:

Anabelly Nolasco at (954) 993-8383
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

17 APR 17 AM 9:52
DIVISION OF CORPORATIONS
STATE OF FLORIDA

**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: Rainforest management Inc
2. The principal office address: 941 E tropical way
plantation FI 33317
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 12/13/2011 Document number: PH000105378
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)

Bielman Alarcon
941 E tropical way
plantation FI 33317

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

Bielman Alarcon
941 E tropical way
plantation FI 33317

P.O. Box NOT acceptable

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]
Signature of an officer or director

Owner - 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]
Signature of Registered Agent

4/11/2017
Date

If signing on behalf of an entity:

Bielman Alarcon
Typed or Printed Name

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
17 APR 17 AM 9:52