P1200006234

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



200247022742

04/23/13--01011--028 **35.00



(Nov 4/24)

COVER LETTER

TO: Amendment Section Division of Corporations			
SUBJECT: THREE 60LDEN BROTHERS, INC. Name of Corporation			
DOCUMENT NUMBER: 7/2 00000 6224			
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:			
Pedro Lazo Name of Contact Person			
THREE GOLDEN BROTHERS, DUC Firm/Company			
29610 SW 228 Ave, Homes tegel, FC 33030 Address			
Homes lead, FL 33030. City/State and Zip Code			
E-mail address: (to be used for future annual report notification)			
For further information concerning this matter, please call:			
Pedro Lazo at (786) 239-9787 Name of Contact Person Area Code & Daytime Telephone Number			
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 607.0302, 617.0302, 607.1308, or 617.1308, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: THREE 60LDEN BNOTHERS, INC. 2. The principal office address: 29610 Sω 228 AUE, HOMESTEAD FC 33030
3. The mailing address (if different): SANG
4. Date of incorporation/qualification: 01/19/2012 Document number: P12000006224
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) Pedro Lazo 266 12 561 228 A. 5
29610 8W 228 AVE 55 TO TO THE MENTENDAD, FL 33030
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Joel Garcia
Joe/ Garcia 12778 δω 259 tr. P.O. Box NOT acceptable
P.O. Box NOT acceptable
Homesterd, FL 33032
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 Pedro Lazo (Hanager) Printed or typed hame 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.
Jac Jan. 4/10/13
Signature of Registered Agent
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)