P12000016889

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
(Onylotate/2)ph Hollowy
PICK-UP WAIT MAIL
•
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
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COVER LETTER

NC
orporation
000016889
/Agent and fee are submitted for filing.
to the following:
Vinals
tact Person
0.T. 0
y & Tax Services
s Rd. Ste 300
ess
L 33063 d Zip Code
lstax.com
iture annual report notification)
all:
at (954) 657-3644 Area Code & Daytime Telephone Number
Area Code & Daytime Telephone Number
ment of State.
Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle

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TO:

Amendment Section Division of Corporations

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 Florida
in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: CDSG INC
2. The principal office address: 2796 Kinsington Cir. Weston, FL 33332
3. The mailing address (if different): Same as above
4. Date of incorporation/qualification: 02/18/2012 Document number: P1/2000016889
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)
Luis N Vinals Sr (resigned)
5100 W Copans Rd. Ste 300
Margate, FL 33063
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Lissette Maria Elias
2796 Kinsington Cir.
P.O. Box NOT acceptable
Weston, FL 33332
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 duty 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.
Luis N. Vinals Sr Signature of an officer or dispetor 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 the 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.
1/1/le Eis 02/22/2012
Signature of Registered Agent Date
If signing on behalf of an entity:
Lissette Maria Elias 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