

P12000018418

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

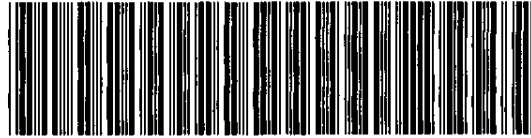
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



600227001516

04/02/12--01020--002 \*\*35.00

Ro chy

FILED  
12 APR -2 PM 3:36  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

APR 03 2012

T. ROBERTS

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** MY SONS HAULING CORP  
Name of Corporation

**DOCUMENT NUMBER:** P12000018418

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:

VANESSA BRAVO  
Name of Contact Person

MY SONS HAULING CORP  
Firm/Company

13509 PRESTWICK DRIVE  
Address

RIVERVIEW, FLORIDA 33579  
City/State and Zip Code

VANY1190@AIM.COM  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

VANESSA BRAVO at ( 954 ) 397-3257  
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 FLORIDA in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: MY SONS HAULING CORP
2. The principal office address: 13509 PRESTWICK DRIVE; RIVERVIEW, FLORIDA 33579
3. The mailing address (if different): \_\_\_\_\_
4. Date of incorporation/qualification: 02/23/2012 Document number: P12000018418
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)

VICTOR M BRAVO, RESIGNED

13509 Prestwick Dr  
Riverview, FL 33579

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

VANESSA BRAVO

13509 PRESTWICK DRIVE; RIVERVIEW, FL 33579

P.O. Box NOT acceptable

**FILED**  
12 APR -2 PM 3:36  
TALLAHASSEE FLORIDA  
SECRETARY OF STATE

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.

Vanessa Bravo  
Signature of an officer or director

VANESSA BRAVO  
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.*

Vanessa Bravo  
Signature of Registered Agent

03/20/2012  
Date

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