

P/2000023955

(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



300245036303

02/27/13--01013--024 **35.00

RA RCH

FILED
13 FEB 27 PM 1:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

REC-4 7013

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: TROPICANA BINGO AND ARCADE CORP.
Name of Corporation

DOCUMENT NUMBER: P12000023955

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:

ADRIANA MORENO
Name of Contact Person

WXC CORPORATION
Firm/Company

8300 NW 53rd STREET, SUITE 350
Address

DORAL, FL 33166
City/State and Zip Code

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

For further information concerning this matter, please call:

ADRIANA MORENO at (305) 742-2187
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: TROPICANA BINGO AND ARCADE CORP
2. The principal office address: 13876 SW 56 ST #259
MIAMI, FL 33175
3. The mailing address (if different): _____

4. Date of incorporation/qualification: MARCH/09/2012 Document number: P12000023955
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)

ORLANDO ROGUE
13876 SW 56 ST #259
MIAMI, FL 33175

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

WXC CORPORATION
8300 NW 53rd STREET, STE. 350
P.O. Box NOT acceptable
DORAL, FL 33166

FILED
13 FEB 27 PM 1:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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.

Enlin Monteverde
Signature of an officer or director

Froilan Monteverde
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.

Adriana Moreno /wxc Corp. 02/21/13
Signature of Registered Agent Date

If signing on behalf of an entity:

Olga A. Moreno
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)