

P12000025055

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

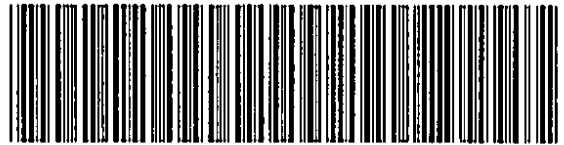
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



500395492795

10/10/2022 10:18:56 AM

FILED TO PUBLIC

2022 OCT 18 PM 3:56

JAN 13

12:55 PM

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Artistas Latinos, Corp.
Name of Corporation

DOCUMENT NUMBER: P12000025055

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:

Yecid Benavides

Name of Contact Person

Artistas Latinos, Corp.

Firm/Company

6900 Bay Dr Unit 9L

Address

Miami Beach, FL 33141

City/State and Zip Code

info@artistaslatinos.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Yecid Benavides

Name of Contact Person

at (786) 448-9705

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
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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: Artistas Latinos, Corp.
2. The principal office address: 6900 Bay Dr Unit 9L
Miami Beach FL
3. The mailing address (if different): 6900 Bay Dr Unit 9L Miami Beach FL 33141
4. Date of incorporation/qualification: 03/13/12 Document number: P12000025055
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)

Northwest Registered Agent LLC

7901 4th St N STE 300

St. Petersburg FL 33702

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

Monahan, Roark R, CPA

75 Valencia Avenue Suite 703

P.O. Box NOT acceptable

Coral Gables, FL 33702

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

Yecid Alejandro Benavides Joffre - CEO

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 of Registered Agent

10/10/2022

Date

If signing on behalf of an entity:

Tom Glover

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 (04/13)

FILED OCT 18 2022

PM 3:56