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COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: Mama Citgo, INC

Name of Corporation

P12000028330

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:

Jason K. Ruggerio
Name of Contact Person

Lyons Law

P.O. Box 940757

Maitland, FL 32794

City/State and Zip Code

jruggerio@fiercerepresentation.com

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

For further information concerning this matter, please call:

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 statement of change is submitted for a corporation organi in order to change its registered office or registe	ized under the laws of the State of Florida	
1. The name of the corporation: Mama Citgo, INC 2. The principal office address: 520 South Orang Orlando, FL 32809		
3. The mailing address (if different): same as above	/e	
4. Date of incorporation/qualification: March 20, 20)12 _{Document number:} P12000028330	
5. The name and street address of the current registered a Florida Department of State: (If resigned, enter resigne		
James Noble		
5401 South Kirkman Road	5401 South Kirkman Road, Suite 310	
Orlando, FL 32819	Orlando, FL 32819	
6. The name and street address of the new registered ager (if changed): Dilshad L. Maher-Ali	nt (if changed) and /or registered office	
6515 Piccadilly Lane		
P.O. Box NOT		
Orlando, FL 32835		
The street address of its registered office and the street as changed will be identical.		
Such change was authorized by resolution duly adopted authorized by the board, or the corporation has been not	tified in writing of the change.	
	Jamil M. Ali, President Printed or typed name and title	
I hereby accept the appointment as registered agent and I further agree to comply with the provisions of all state performance of my duties, and I am familiar with and a agent. Or, if this document is being filed merely to reflect the performance of my duties agent. Or, if this document is being filed merely to reflect the performance of my duties.	d agree to act in this capacity. utes relative to the proper and complete accept the obligation of my position as registered ect a change in the registered office address, l	
Dilata J Aii Signature of Registered Agent	May 31, 2012	
If signing on behalf of an entity:		
Typed or Printed Name * * * FILING FE	'E. 225 00 * * *	
" " FILING FE	E. JJJ.UU	

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (03/12)