

# **2014 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P12000039201

**Entity Name:** SOTELO PAINTING INC.

**FILED**  
**Oct 29, 2014**  
**Secretary of State**

**Current Principal Place of Business:**

7500 POWERS AVE.  
APT. 203  
JACKSONVILLE, FL 32217 DU

**New Principal Place of Business:**

**Current Mailing Address:**

7500 POWERS AVE.  
APT. 203  
JACKSONVILLE, FL 32217 DU

**New Mailing Address:**

**FEI Number:** 45-5176113

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

SOTELO, KEILANI  
7500 POWERS AVE.  
APT 203  
JACKSONVILLE, FL 32217 DUV US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

**SIGNATURE:** KEILANI SOTELO

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

**Title:** PRES  
**Name:** SOTELO, KEILANI  
**Address:** 7500 POWERS AVE.  
**City-St-Zip:** JACKSONVILLE, FL 32217 DU

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

**SIGNATURE:** KEILANI SOTELO

PRES

10/29/2014

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date