

P120000041646

(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



100244213301

02/04/13--01011--008 \*\*35.00

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
13 FEB -4 AM 9:11

R A / R O / chg  
@ 2/5/13

## COVER LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: Gente Linda Accesorios INC.  
Name of Corporation

DOCUMENT NUMBER: P 12000041646

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:

Joanne Rodriguez  
Name of Contact Person

Firm/Company

216 N US HWY 17#92  
Address

Lompoc CA 32750  
City/State and Zip Code

boogiedog46@gmail.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Joanne Rodriguez at ( 614 ) 446 0788  
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 FL. in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Gente Linda Accesorios inc.
2. The principal office address: 216 N US Hwy 17-92 Longwood FL 32750
3. The mailing address (if different): \_\_\_\_\_
4. Date of incorporation/qualification: 5/03/12 Document number: P12006041646

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)

Brenda Uzzaino

670 A HARDUFF LN

Winter Springs FL 32708

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

Joanne Rodriguez

165 Pinefield dr.

P.O. Box NOT acceptable

Sanford FL 32711

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] \_\_\_\_\_  
Signature of an officer or director 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] Joanne Rodriguez 1/25/12  
Signature of Registered Agent 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

CR2E045 (03/12)

FILED STATE  
SECRETARY OF CORPORATIONS  
DIVISION OF CORPORATIONS  
13 FEB -4 AM 9:11