

P12000043019

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

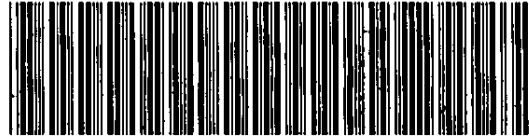
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
16 JUN -2 PM 10:29

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Scooters 4U INC.
Name of Corporation

DOCUMENT NUMBER: P12000043019

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:

USRULA Delgado
Name of Contact Person

Scooters 4U INC.
Firm/Company

1226 South Dixie Hwy
Address

Hollywood, FL 33020
City/State and Zip Code

scooters4u2012@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

USRULA Delgado
Name of Contact Person

at (954) 544-3509
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

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SECTION OF CORPORATIONS
16 JUN -2 11:10:20

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 _____ in order to change its registered office or registered agent, or both, in the State of Florida.

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STATE
DIVISION OF
CORPORATIONS
16 JUN -2 PM 10:25

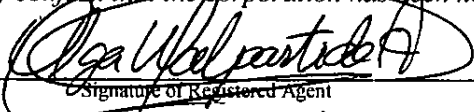
1. The name of the corporation: SCOOTERS 4U INC.
2. The principal office address: 1226 South Dixie Hwy
Hollywood FL 33020
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 5/8/12 Document number: D12000043019
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)
JOSE Delgado
1226 South Dixie Hwy
Hollywood, FL 33020
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
OLGA ROSARIO MALPARTIDA
1226 S Dixie Hwy Hollywood
FL 33020
P.O. Box NOT acceptable

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	<u>JOSE DELGADO VP</u> _____ Printed or typed name and title
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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	<u>05/17/2016</u> _____ Date
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If signing on behalf of an entity:
OLGA MALPARTIDA ARENAS.

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