

P12000043990

(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



000266503820

11/21/14--01011--015 **35.00

14 NOV 21 PM 7:07
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

NOV 21 2014
T. LEMIEUX

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: PAINTING BY JOEL, INC

Name of Corporation

DOCUMENT NUMBER: P1200043990

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:

JOEL PINO

Name of Contact Person

Firm/Company

9350 FONTAINBLEAU BLVD. #C102

Address

MIAMI, FL 33172

City/State and Zip Code

joel_pino@hotmail.com

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

For further information concerning this matter, please call:

Joel Pino

Name of Contact Person

at (352) 321-5349

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

1. The name of the corporation: PAINTING BY JOEL, INC
2. The principal office address: 9350 Fontainebleau Blvd #C102
Miami, FL 33172
3. The mailing address (if different): Same as above
4. Date of incorporation/qualification: 5/6/12 Document number: P12000043990
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)

Joel Pino

256 Nautica Mile Drive

Clermont, Florida 34711

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

9350 Fontainebleau Blvd. #C102

Miami, FL 33172

P.O. Box NOT acceptable

14 NOV 21 PM 7:07
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APPROVED
AND
FILED

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

Sharon Pino

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

11/17/14

Date

If signing on behalf of an entity:

Typed or Printed Name

*** FILING FEE: \$35.00 ***