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COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: HAMM'S TAXES And Accounting, Inc Name of Corporation
DOCUMENT NUMBER: P 120000 79513
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:
ROSEIIA E DORE Name of Contact Person
HAMM'S TAXES And Accounting, Inc
752 NW 188 DRIVE
Miami Gardens, 7L 33/69 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Name of Contact Person Name of Contact Person
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 1/2 v i loc. in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: HAMM'S TAXES And Accounting I
2. The principal office address: 18300 NW 62nd Ave STEIDO
<u>MiAmi 71 33015</u>
3. The mailing address (if different):
4. Date of incorporation/qualification: 9 12 2012 Document number: P120000 79513
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)
ROSELLA E DORE
18300 NW 62 ND AVE STE 100
miami 71. 33015
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
152 NW 188 DRIVE 7
Miami GARDENS, 71. 33/69 3 2005 15 55 55 55 55 55 55 55 55 55 55 55 55
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 Rusella E Done 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 9/5/2014 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)