

P1200000

83081

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

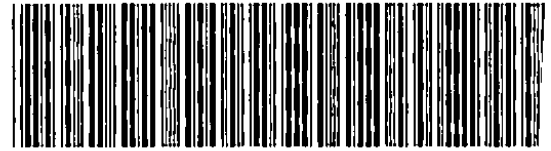
(Document Number)

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FLORIDA DEPARTMENT OF STATE  
Division of Corporations

April 24, 2020

SERGIO BLACK  
1102 BANYAN DRIVE  
HOLLYWOOD, FL 33021

SUBJECT: SCPINNACLE SERVICES INC  
Ref. Number: P12000083081

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

We are enclosing a computer printout which reflects the registered agent and registered office now on file with this office. Please amend your document accordingly.

If the corporation is a **PROFIT** corporation it must be signed by a director, president or other officer if directors or officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Querida R Moore  
Regulatory Specialist II

Letter Number: 920A00008582

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# COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** SCPINNACLE SERVICES INC  
Name of Corporation

**DOCUMENT NUMBER:** P12000083081

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:

SERGIO BLACK

Name of Contact Person

N/A

Firm/Company

1102 BANYAN DRIVE

Address

HOLLYWOOD FL 33021

City/State and Zip Code

TWISTPOLAR@GMAIL.COM

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

For further information concerning this matter, please call:

SERGIO BLACK

Name of Contact Person

at (954) 5497199  
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  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

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

1. The name of the corporation: SCPINNACLE SERVICES INC

2. The principal office address: 1102 BANYAN DRIVE HOLLYWOOD FL 33021

3. The mailing address (if different): 1102 BANYAN DRIVE HOLLYWOOD FL 33021

4. Date of incorporation/qualification: 09/25/2012 Document number: P12000083081

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)

~~3140 S OCEAN DRIVE #911 HALLANDALE FL 33009~~ SERGIO Black  
2500 Parkview Drive # 2318  
Hallandale FL 33009

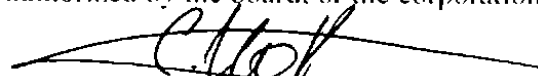
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

1102 BANYAN DRIVE HOLLYWOOD FL 33021

P.O. Box NOT acceptable

The street address of its registered office and the street address of the business office of its registered 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

SERGIO BLACK P  
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 perform of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or document is being filed merely to reflect a change in the registered office address, I hereby confirm to corporation has been notified in writing of this change.

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

04/10/2020

\_\_\_\_\_  
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 (04/13)

2020 APR 14 2 27 PM EDT