

P130000019499

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

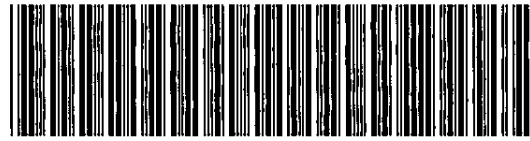
(Business Entity Name)

(Document Number)

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DIVISION OF CORPORATIONS
14 JAN 14 11:03:12

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@ 1.16.14

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: MARIA DEL PILAR GRANADOS P.A.
Name of Corporation

DOCUMENT NUMBER: P13000019499

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:

MARIA DEL PILAR GRANADOS
Name of Contact Person

MARVA DEL PILAR GRANADOS P.A
Firm/Company

6863 SW 194 AVENUE
Address

FORT LAUDERDALE, FL 33332
City/State and Zip Code

Pilar Granados@live.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

MARIA DEL PILAR GRANADOS at (954) 980 8965
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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 30, 2013

MARIA DEL PILAR GRANDOS
6863 SW 194 AVE
FORT LAUDERDALE, FL 33332

SUBJECT: MARIA DEL PILAR GRANADOS P.A.
Ref. Number: P13000019499

RECEIVED
14 JAN 14 AM 11:13
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

We have received your document for MARIA DEL PILAR GRANADOS P.A. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A business entity may not serve as its own registered agent. Please designate an individual or another business entity with an active registration or filing with this office, having a Florida street address identical with that of the registered office.

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.

Irene Albritton
Regulatory Specialist II

Letter Number: 113A00029292

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

1. The name of the corporation: MARIA DEL PILAR GRANADOS P.A.
2. The principal office address: 6863 SW 194 AVE
FORT LAUDERDALE, FL 33332
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 02/28/13 Document number: PL3000019499
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)

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301

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

MARIA DEL PILAR GRANADOS
6863 SW 194 AVE
P.O. Box NOT acceptable
FORT LAUDERDALE, FL 33332

FILED STATE
SECRETARY OF CORPORATIONS
DIVISION OF CORPORATIONS
14 JAN 14 PM 1:12

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.

Maria Del Pilar Granados
Signature of an officer or director

MARIA DEL PILAR GRANADOS
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.

Maria Del Pilar Granados
Signature of Registered Agent

01/09/14
Date

If signing on behalf of an entity:

Typed or Printed Name

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