

(Req	uestor's Name)	
(Add	ress)	
(Add	ress)	
(City)	/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Busi	iness Entity Nan	ne)
(Doc	ument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to F	iling Officer:	

Office Use Only



900256839489

02/18/14--01015--001 **35.00

PEB 18 2014

R. WHITE

SECULIARIST OF STATE

COVER LETTER

Division of Corporations
SUBJECT: ABRICO MANAGEMENT, INC Name of Corporation
DOCUMENT NUMBER: A - 1 - 209769
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:
BEHNAM ABRISHAMI Name of Contact Person McDonald'S Firm/Company
4878 N. KINGS HWY Address Ft. PIERCE F1 34951 City/State and Zip Code
FL. PIERCE FI 34951
ben. abrishami OPartners. mcd. Com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
BEHNAM ABRISHAMI at (561) Z89-2116 Name of Contact Person at 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

TO:

Amendment Section

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: ABRICO MANAGEMENT, INC. 2. The principal office address: 345 StW. 188 AVE.
2. The principal office address: 345 Siw. 188 AVE. Pembroke Pines F1 33029
3. The mailing address (if different): P.O. Box 3574 Ft. Pierce Fl 34948
4. Date of incorporation/qualification: 3/20/3 Document number: A-1-209769
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)
Corporate Creations International Inc.
11380 Prosperity Farms Road #221
E, Palm Beach Gordens, F1 33410 client number 1-13-163410
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Pembroke Pines F/ 33029
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.
BEHNAM ABRISHAMI, President 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 Date
If signing on behalf of an entity:
Typed or Printed Name

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (03/12)

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