P13000029086

(Re	equestor's Name)	<u> </u>
(Address)		
(Address)		
(Ci	ty/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Business Entity Name)		
(Document Number)		
Certified Copies	Certificate:	s of Status
Special Instructions to Filing Officer:		
	, 	

Office Use Only



100274271101

06/23/15--01025--020 **595.00

285 JUN 23 PH 2: 48

ROCOS

JUL 1 2015

I ALBRITTON

COVER LETTER

TO: Amendment Section Division of Corporations			
SUBJECT: Goyebel CORP. Name of Corporation			
DOCUMENT NUMBER: 9130000 29086			
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:			
rease return an correspondence concerning this matter to the ronowing.			
Nestor Gorfinkel			
Name of Contact Person			
Registered Services, LLC			
Firm/Company			
2241 Hollywood Blvd.			
Address			
Hollywood, FL 33020			
City/State and Zip Code			
fl.regservices@gmail.com			
E-mail address: (to be used for future annual report notification)			
For further information concerning this matter, please call:			
Nestor Gorfinkel Name of Contact Person at (305) 932-5757 Area Code & Daytime Telephone Number			
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 Street Address: Amendment Section			
Division of Corporations P.O. Box 6327 Division of Corporations Clifton Building			

Tallahassee, FL 32314

2661 Executive Center Circle

Tallahassee, FL 32301

CR2E045 (03/12)

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

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 * * *