

P13000032146

2018-05-20 15:45:10 (GMT)

1-888-401-1914 From: Silvas Financial Services, LLC

5/30/2018

Division of Corporations

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To: Division of Corporations
Fax Number : (850)617-6380

From: Account Name : SILVAS FINANCIAL SERVICES, L.L.C.
Account Number : 120020000100
Phone : (305)944-9755
Fax Number : (888)401-1914

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

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2018 MAY 30 PM 4:00

**REGISTERED AGENT CHANGE
MERCHANDISING CONSULTANTS SRL CORP.**

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$35.00

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SECRETARY OF STATE
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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: MERCHANDISING CONSULTANTS SRL CORP.
Name of Corporation

DOCUMENT NUMBER: P13000032146

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:

DANIEL CIFUENTES

Name of Contact Person

SILVAS FINANCIAL SERVICES LLC

Firm/Company

5220 S UNIVERSITY DRIVE SUITE 102

Address

DAVIE FL 33328

City/State and Zip Code

ACCOUNTING2@SILVASBOX.COM

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

For further information concerning this matter, please call:

DANIEL CIFUENTES

Name of Contact Person

at 305 9449755

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

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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: MERCHANDISING CONSULTANTS SRL CORP
2. The principal office address: 5220 S UNIVERSITY DRIVE SUITE 102, DAVIE FL 33328
3. The mailing address (if different): 5220 S UNIVERSITY DRIVE SUITE 102, DAVIE FL 33328
4. Date of incorporation/qualification: 04/08/2013 Document number: P13000032146
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)

GUTTER, LEONARDO

2617 N 40 AVE HOLLYWOOD, FL 33021

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

SILVAS FINANCIAL SERVICES LLC

5220 S UNIVERSITY DRIVE SUITE 102

P.O. Box NOT acceptable

DAVIE FL 33328

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The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

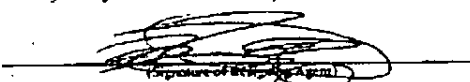
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.


 Signature of an officer or director

LEONARDO GUTTER

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 the Registered Agent

05/30/2018

Date

If signing on behalf of an entity:

LEONARDO GUTTER

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)