## P130000 50893

(Re	equestor's Name)	
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PICK-UP	WAIT	MAIL
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Certified Copies Certificates of Status		
Special Instructions to	Filing Officer:	
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Ra Change

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

Carmona Veterinary Corp

Name of Corporation

DOCUMENT NUMBER, P13000050893

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:

Liza Carmona

Name of Contact Person

Carmona Veterinary Corp

Firm/Company

9530 Harding Ave.

Address

Surfside, FL 33154

City/State and Zip Code

thedoggydoc@gmail.com

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

For further information concerning this matter, please call:

Liza Carmona

<sub>.</sub> 305

4014095

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

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

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this imge is submitted for a corporation organized under the laws of the State of Florida or to change its registered office or registered agent, or both, in the State of Florida.	
1. The name of t	the corporation: Carmona Veterinary Corp	
2. The principal	office address: 9530 Harding Ave. Surfside, FL 33154	
3. The mailing a	address (if different):	
4. Date of incorp	poration/qualification: 4/19/2014 Document number: P13000050893	
	d street address of the current registered agent and registered office on file with the rtment of State: (If resigned, enter resigned)	
	Alex Ortiz	
	2727 Ponce De Leon Blvd.	
	Coral Gables, FL 33134	ت ع
6. The name and (if changed):	Liza Carmona  8958 Carlyle Ave.  P.O. Box NOT acceptable	24
	Liza Carmona 29	7
	8958 Carlyle Ave.	2
	Surfside, FL 33154	100
The street address changed will	ess of its registered office and the street address of the business office of its registered agent, be identical.	,
Such change wa authorized by the	as authorized by resolution duly adopted by its board of directors or by an officer so he board, or the corporation has been notified in writing of the change.	
	Dand Carnona, President Printed or typed name and title	
performance of agent. Or. if th	the appointment as registered agent and agree to act in this capacity. to comply with the provisions of all statutes relative to the proper and complete my duties, and I am familiar with and accept the obligation of my position as registered is document is being filed merely to reflect a change in the registered office address, I that the corporation has been notified in writing of this change.	
	3 26 18	
	mature of Registered Agent Date	
Liza	chalf of an entity:  (A/MOA)  (yped or Printed Name	

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