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REGISTERED AGENT CHANGE RESTAURANTE EL TINAJON INC

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COVER LETTER

TO:

Amendment Section Division of Corporations

_{suвлест։}Restaurante El Tinajoˈn, Inc.

Name of Corporation

DOCUMENT NUMBER: P130000647

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:

Aridis Martinez Alba

Name of Contact Person

Restaurante El Tinajon, Inc.

Firm/Company

6355 NW 36th St., First Floor

Address

Virginia Gardens, FL. 33166

City/State and Zip Code

aleadriaj@gmail.com

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

For further information concerning this matter, please call:

Aridis Martinez Alba

Name of Contact Person

305 \399-72:35

Area Code & Daytime Te ephone 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

CR2E045 (03/12)

CR2E045 (03/12)

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

Pursuant to the provisions of sections 607.0502, 617.0502	2, 607.1508, or 617.1508, Florina Statutes, this
statement of change is submitted for a corporation organinin order to change its registered office or register	red agent, or both in the State of Florida
1. The name of the corporation: Restaurante El Tir	
	First Floor, Virginia Gardens, FL. 33166
2. The principal office angress.	The Children Cardens, FE. 33 186
3. The mailing address (if different): Same	
4. Date of incorporation/qualification: 08/02/2013	Document number: P13()00064797
5. The name and street address of the current registered as Florida Department of State: (If resigned, enter resigned	cent and registered office on file with the
CSG-CAPITAL SERVICES	ROUP,INC.
446 W HILLSBORO BLVD	
Deerfield Beach, FL. 33441	20
6. The name and street address of the new registered agent (if changed):	(if changed) and /or registered office
Aridis Martinez Alba	
3655 NW 36th St. First Floor	
P.O. Box NOT	cceptable
Virginia Gardens, FL. 33166	8
The street address of its registered office and the street as changed will be identical.	
Such change was authorized by resolution duly adopted tauthorized by the board, or the corporation has been noti	y its board of directors or by an officer so fied in writing of the change.
	Aridis Martinez Alba
Signature of an other of director I hereby accept the appointment as registered agent and	Printed or typed name and title
I further agree to comply with the provisions of all statut performance of my duties, and I am familiar with and ac agent. Or, if this document is being filed merely to reflec hereby confirm that the corporation has been notified in	ne valation to the need-a said as and st
x () w h	09/26/2019
Signature of Registered Agent	Date
If signing on behalf of an entity:	
Aridis Martinez Alba	
Typed or Printed Name	275 00 444
* * * FILING FEE	11.
Make checks payable to Flor Mail to: Division of Corporations, P.O	DA DEPARTMENT OF STATE BOX 6327, TALLAHASSEE, FL 32314