## P13000077062

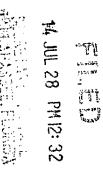
(Requestor's Name)
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(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
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AUG 0 7 2014

C. CARROLL

## COVER LETTER

	n of Corporations			
SUBJECT:	RICARDO	DOMINGUE Name of Corpora	<b>7</b>	
		Name of Corpora	ation	-
DOCUMENT I	NUMBER: P \3	30000770	62	
The enclosed St	atement of Change of	Registered Office/Age	nt and f	ee are submitted for filing.
Please return all	correspondence conce	rning this matter to th	e follow	ving:
	•	J		
	EKAR	Name of Contact 1	erson	<u> </u>
	PICARD	Firm/Compan	ià ra <u>e</u> S	, P.A
	20	S8 MADE!! Address	<u> </u>	<u> </u>
		STON FL City/State and Zip	SS:	527
	E-mail address: (i	ZB\60TO6 to be used for future	annual	report notification)
For further info	rmation concerning this	s matter, please call:		
RKARD	DOMINGE Q	SEZ at (	30!	5 ) 900 -07 39 ode & Daytime Telephone Number
	Name of Contact Perso	n	Area C	ode & Daytime Telephone Number
Enclosed is a \$3	5.00 check made paya	ble to the Department	of State	s.
	Mailing Addr Amendment S Division of C P.O. Box 632 Tallahassee,	Section Corporations 27	Ām Div Cli	eet Address: nendment Section vision of Corporations fton Building 51 Executive Center Circle

Tallahassee, FL 32301

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

	ange is submitted for a corporation organized under the laws of the State oferror to change its registered office or registered agent, or both, in the State of Florida.
1. The name of	the corporation: PICARDO DOMINGUEZ P.A.
2. The principal	office address: 2058 MADEIRA DR. WESTON FL 33327
3. The mailing a	address (if different):
4. Date of incor	poration/qualification: 9/18/2013 Document number: P1300077062
	d street address of the current registered agent and registered office on file with the rtment of State: (If resigned, enter resigned)
	CORPORATION SERVICE COMPANY
	1201 HAYS STREET
	TALLAHASSEE FL 32301
6. The name and (if changed):	d street address of the new registered agent (if changed) and /or registered office
	PICAPDO DOMINGUEZ P.A.
	P.O. Box NOT acceptable
	<u>waston</u> fl 33327
The street address changed will	ess of its registered office and the street address of the business office of its registered agent, l 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.
Signatu	Printed or typed name and title
I hereby accept I further agree berformance of agent. Or, if th hereby confirm	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.
	mature of Registered Agent Date
_	chalf of an entity:
	yped or Printed Name