## P1300094319

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C. LEWIS

JUN 6 2014

EXAMINER

## **COVER LETTER**

TO: Amendment Section Division of Corporations

Intamalca Edilas Inc

P13000094319

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:

Argenis De Los Santos

Ontamalca Edilas Inc

Firm/Company

4767 New Broad Street

Orlando, Florida 32814

City/State and Zip Code

onm@ontamalcaedilas.com

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

For further information concerning this matter, please call:

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	nge is submitted for a corporation organ	12, 607.1508, or 617.1508, Florida Statutes nized under the laws of the State of <mark>Florida</mark> ered agent, or both, in the State of Florida.	
1. The name of t	he corporation: Ontamalca Edila	as Inc	
2. The principal	office address: 4767 New Broad	d Street Orlando, Florida 328	314
3. The mailing ac	ddress (if different):		
4. Date of incorp	poration/qualification: 29/04/2014	Document number: P1300009	4319
	street address of the current registered a tment of State: (If resigned, enter resigned	gent and registered office on file with the ed)	
	DE LOS SANTO, ARGENIS 283 CRANES ROOST BLVD ALTAMONTE SPRINGS, FL 3270	<u> </u>	14 MAY SECRL TALLAH
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):  4767 New Broad Street Orlando, Florida 32814			
	P.O. Box NOT	'acceptable	907 10
_		address of the business office of its registe	
Such change wa authorized by th	s authorized by resolution duly adopted e board or the corporation has been not	by its board of directors or by an officer stiffied in writing of the change.	so
Ogene	y Herrandes e of an other or director	Argenis De Los Santos / Pres	sident
I turther goree t	the appointment as registered agent and o comply with the provisions of all state my duties, and I am familiar with and a s document is being filed merely to reflect the exproration has been notified in	d agree to act in this capacity. utes relative to the proper and complete eccept the obligation of my position as reg ect a change in the registered office addre n writing of this change.	istered ess, I
Orgen	ature of Registered Agent	05/13/2014	
If signing on bel	c c	Date	
<del></del>	e Los Santos ped or Printed Name		

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 \* \* \*