

P1300097369

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

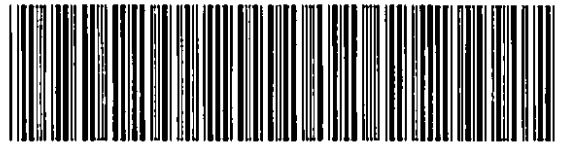
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



700317553937

08/24/18--01008--012 **35.00

AUG 27 2018
S. YOUNG

FILED
18 AUG 24 AM 8:50
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Ant Underground Inc.
Name of Corporation

DOCUMENT NUMBER: 46-4257646

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:

Carmen Justiniano
Name of Contact Person

Firm/Company

200 SW 100 Ave
Address

Pembroke Pines FL 33025
City/State and Zip Code

gafo25@hotmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Carmen Justiniano at (239) 603 9213
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**

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: Ant Underground Inc
2. The principal office address: 300 SW 100 Ave, Pembroke Pines
FL 33025
3. The mailing address (if different): _____

4. Date of incorporation/qualification: 12-12-13 Document number: 46-4257646
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)

11306 Pond Cypress Street
Fort Myers FL 33913
Carmen Fjustiniano

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

Carmen Fjustiniano
300 SW 100 Ave
P.O. Box NOT acceptable
Pembroke Pines FL 33025

FILED
18 AUG 24 AM 8:50
SECOND FLORIDA
TALLAHASSEE

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]
Signature of an officer or director

Antonio Vega
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]
Signature of Registered Agent

8-21-18
Date

If signing on behalf of an entity:

Typed or Printed Name

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