

P14 00008834

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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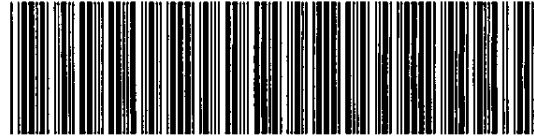
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

OCT 15 2014
C. CARROTHERS

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: TA Building Services
Name of Corporation

DOCUMENT NUMBER: P14000008834

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:

Pedro Anilo

Name of Contact Person

Firm/Company

2940 Carmela St.

Address

Pelham FL 32738

City/State and Zip Code

pedroanilo07@gmail.com

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

For further information concerning this matter, please call:

Pedro Anilo

Name of Contact Person

at (407) 940-0286

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 FL in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: TA Building Services
2. The principal office address: 2940 Carmela St. Deltona FL 32738
3. The mailing address (if different): _____

4. Date of incorporation/qualification: _____ Document number: PM 00000 8834

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)

2940 Carmela St. Deltona FL 32738

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

1511 Seminola Blvd. Suite 1027

Casselberry FL 32707

P.O. Box NOT acceptable

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.

Pedro Anillo

Signature of an officer or director

Pedro Anillo

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.

Pedro Anillo

Signature of Registered Agent

10/6/15

Date

If signing on behalf of an entity:

Pedro Anillo

Typed or Printed Name

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

CR2E045 (03/12)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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