P14000010352

(Re	questor's Name)			
(Address)				
(Ad	dress)			
(Cit	y/State/Zip/Phone	e #)		
PICK-UP	☐ WAIT	MAIL		
(Bu	siness Entity Nan	ne)		
(Document Number)				
Certified Copies	_ Certificates	of Status		
Special Instructions to Filing Officer:				

Office Use Only



000284352610



04/18/16--01008--013 **35.00



4/2001

COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: SaltWater Cubiche Inc.

Name of Corporation

DOCUMENT NUMBER. P14000010352

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:

Adalberto Vigil

Name of Contact Person

SaltWater Cubiche Inc.

Firm/Company

P.O.Box 378980

Address

Key Largo, Florida 33037

City/State and Zip Code

AdalbertoVigil@gmail.com

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

For further information concerning this matter, please call:

Adalberto Vigil

305 \7

766-1234

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 statement of ch	e provisions of sections 607.0502 nange is submitted for a corporate	l, 617.0502, 607.1508, or 617.1508 ion organized under the laws of the	R, Florida Statutes, this
in ord	ler to change its registered office	or registered agent, or both, in the	State of Florida.
	f the corporation: SaltWater C		
	al office address: 539 Sound		
	go, Florida 33037		
3. The mailing	address (if different): P.O.BO	x 378980, Key Largo, Flo	rida 33037 😹
			7
4. Date of incor	rporation/qualification: $2/3/$	Document number:	P14000010352
	nd street address of the current regartment of State: (If resigned, enter	gistered agent and registered office er resigned)	on file with the
	Irene Brito, Resigned		<u></u>
	110 Oleander Drive, K	ey Largo, Florida 33037	
6. The name an (if changed):		tered agent (if changed) and /or reg	ristered office
•	Adalberto Vigil		
	539 Sound Drive, Key	Largo, Florida 33037 D. Box NOT acceptable	
as changed will	II be identical.	he street address of the business o	
Such change wanthow authorized by	vas authorized by resolution duly the board, or the corporation has	y adopted by its board of directors s been notified in writing of the ch	or by an officer so lange
		HOALESAND VIGE	les
77 . 6	ture of an officer of director of the appointment as registered to comply with the provisions of fmy duties, and I am familiar w his document is being filed mere n that the corporation has been i	agent and agree to act in this cap of all statutes relative to the prope with and accept the obligation of m ely to reflect a change in the regis on the regis of this change.	name and title pacity. or and complete ny position as registered fered office address, I
		ASABORO VI	si he
	ignature of Registered Agent pehalf of an entity:	Dai	w.
	Typed or Printed Name	~-	
	* * * FII	LING FEE: \$35.00 * * *	

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