# P14000011737

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#### COVER LETTER

TO:

Amendment Section Division of Corporations

SUBJECT: Executive Copiers, Inc

P14000011737

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:

#### KRISTOFER SOTO-SANTIAGO

Name of Contact Person

**Executive Copiers, Inc** 

Firm/Company

1755 Business Center Lane

Address

Kissimmee, FL 34758

City/State and Zip Code

### executivecopier@gmail.com

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

For further information concerning this matter, please call:

KRISTOFER SOTO-SANTIAGO at (321 ) 402-1271

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, 617.050 statement of change is submitted for a corporation organization order to change its registered office or registered.	nized under the laws of the State of FLORIDA
1. The name of the corporation: Executive Copiers	s, Inc
2. The principal office address: 1755 Business Ce	enter Lane, Kissimmee, FL 34758
3. The mailing address (if different): 1755 Business	s Center Lane, Kissimmee. FL 34758
4. Date of incorporation/qualification: 02-06-14	Document number: P14000011737
5. The name and street address of the current registered a Florida Department of State: (If resigned, enter resign	
KRISTOFER SOTO-SANTIA	AGO
1755 Business Center Lane,	
6. The name and street address of the new registered age (if changed):	ent (if changed) and /or registered office
1755 Business Rissimmee, Fl	<u>center</u>
The street address of its registered office and the street as changed will be identical.	t address of the business office of its registered agent,
Such change was authorized by resolution duly adopte authorized by the board, or the corporation has been no	d by its board of directors or by an officer so otified in writing of the change.
Signature of an officer or director	KRISTOFER SOTO-SANTIAGO, President Printed or typed name and title
I hereby accept the appointment as registered agent at I further agree to comply with the provisions of all states performance of my duties, and I am familiar with and agent. Or, if this document is being filed merely to ref hereby confirm that the corporation has been notified	tutes relative to the proper and complete
	03-22-2014
Signature of Registered Agent	Date
If signing on behalf of an entity:	
KRISTOFER SOTO-SANTIAGO	

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

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

Typed or Printed Name