

(Re	equestor's Name)			
(Ad	dress)			
(Ad	idress)			
(Cit	ty/State/Zip/Phon	e #)		
PICK-UP	☐ WAIT	MAIL		
(Bu	ısiness Entity Nar	me)		
(Document Number)				
Certified Copies	_ Certificate:	s of Status		
Special Instructions to Filing Officer:				

Office Use Only



05/03/16--01026--016 \*\*35.00

1/AY 05 2016

R. Vyenna

16 HAY -3 PH 3:59
SECTION OF STATE
MALLATIANSFE FI SHEET

#### **COVER LETTER**

**TO:** Amendment Section Division of Corporations

SUBJECT: Pickups Moving and Delivery, Inc.

Name of Corporation

DOCUMENT NUMBER: P14000025123

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:

#### Michael McGivern

Name of Contact Person

## Pickups Moving and Delivery, Inc.

Firm/Company

1900 Mercer Avenue

Address

Lehigh Acres, FL 33972

City/State and Zip Code

### mattmcgivern13@gmail.com

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

For further information concerning this matter, please call:

Matthew McGivern

<u>,,</u>484 \241-70

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

statement of cha	provisions of sections 607.0502, 617.05 ange is submitted for a corporation orgo or to change its registered office or regi	anized under the laws of the State of	Florida	_
1. The name of	the corporation: Pickups Moving	and Delivery, Inc.		
	office address: 1900 Mercer Ave		72	
3. The mailing a	address (if different):			
4. Date of incor	poration/qualification: March 19, 2	2014 Document number: P1400	00025123	
	I street address of the current registered rtment of State: (If resigned, enter resigned)		ith the	
	United States Corporation A	Agents, Inc.		
	13302 Winding Oak Court,	Α		
	Tampa, FL 33612			
6. The name and (if changed):	l street address of the new registered ag	gent (if changed) and /or registered of	16 HAY -	~ V ;
	Michael McGivern		ညည္း ယ	1 ***
	1900 Mercer Avenue		्राम्स Ç çç	† 4 min 5
	Lehigh Acres, FL 33972	OT acceptable	59	
The street address changed will	ess of its registered office and the stree be identical.	at address of the business office of it	s registered age	ent,
_	as authorized by resolution duly adopte the board, or the corporation has been n			
Matthew	re of a other of director	Matthew McGivern, Secretary		_
I hereby accept I further agree to performance of agent. Or, if the	the appointment as registered agent a to comply with the provisions of all sta my duties, and I am familiar with and is document is being filed merely to re that the corporation has been notified	nd agree to act in this capacity. htutes relative to the proper and com accept the obligation of my position flect a change in the registered offic	iplete i as registered	
Michael !	MCS.	April 28, 2016		
9	nature of Registered Agent	Date		_
• •	half of an entity:			
	Givern, President			

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 \* \* \*