

P140000028166

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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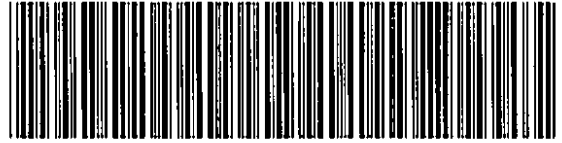
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RALPH

AUG 03 2018

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Apollo Uniform and Footwear Inc.

Name of Corporation

DOCUMENT NUMBER: P14000028166

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:

Jason Riera

Name of Contact Person

Apollo Uniforms and Footwear

Firm/Company

111 Flamingo Dr

Address

Apollo Beach FL 33572

City/State and Zip Code

JayRiera@gmail.com

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

For further information concerning this matter, please call:

Jason Riera

Name of Contact Person

at (347) 9013810

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: Apollo Uniform and Footwear Inc.
2. The principal office address: 111 Flamingo Dr, Apollo Beach FL 33572
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 3/21/2014 Document number: P14000028166
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)

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111 Flamingo Dr

Apollo Beach, FL 33572

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

Jason Riera

111 Flamingo Dr

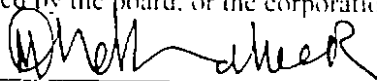
P.O. Box NOT acceptable

Apollo Beach FL 33572

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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 of an officer or director

Zaheer Sheik, Owner

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 of Registered Agent

7/26/2018

Date

If signing on behalf of an entity:

Jason Riera

Typed or Printed Name

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