

P140000090349

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

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TO: Amendment Section
Division of Corporations

SUBJECT: EBENEZER LAWN SERVICE CORP
Name of Corporation

DOCUMENT NUMBER: P14000090349

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:

RENE MAZARIEGOS
Name of Contact Person

Firm/Company
3651 SW 13 COURT APT. 1
Address

FORT LAUDERDALE FL 33312
City/State and Zip Code

HERLYNDIAZ@GMAIL.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

RENE MAZARIEGOS at (954) 200-3189
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, 617.0502, 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: EBENEZER LAWN SERVICE CORP
2. The principal office address: 3651 SW 13 COURT APT. 1 FORT LAUDERDALE FLORIDA 33312

3. The mailing address (if different): _____

4. Date of incorporation/qualification: 10/31/2014 Document number: P14000090349

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)

DE LA CRUZ FINANCIAL SERVICES

1701 WEST FLAGLER STREET #320 MIAMI FL 33127

RESIGNED

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

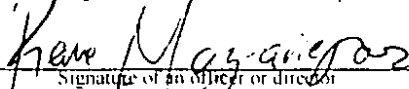
RENE MAZARIEGOS

3651 SW 13 COURT APT. 1 FORT LAUDERDALE FL 33312

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.



Signature of an officer or director

RENE MAZARIEGOS (PRESIDENT, OWNER)

Printed or typed name and title

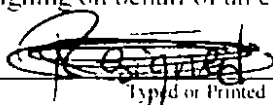
I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if 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.

10/19/2017

Signature of Registered Agent

Date

If signing on behalf of an entity:



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)

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2017 OCT 23 PM 3:18
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TALLAHASSEE, FLORIDA