

(Requestor's Name)
(Acdress)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



600300125326

08/12/17--01014--011 **38.00

The state of the s

Ra Chang

COVER LETTER

Name of Corporation

DOCUMENT NUMBER: P14000097469
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:
Darcel Aguilar Name of Contact Person
Best Quality Tools, Inc.
7401 NW 68 St G18
Liami, Fl. 33166 City/State and Zip Code
bestquality 14@ Jahoo.com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call: Day Cel Aguilar at 786, 295-2073 Name of Contact Person Area Code & Daytime Telephone Number
Enclosed is a \$35.00 check made payable to the Department of State.

Street Address: Amendment Section Division of Corporations

Tallahassee, FL 32301

2661 Executive Center Circle

Clifton Building

Mailing Address: Amendment Section

P.O. Box 6327

Division of Corporations

Tallahassee, FL 32314

TO:

SUBJECT:

Amendment Section Division of Corporations

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 Honda
in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: Best Quality Tools Inc.
2. The principal office address: 8181 NW South River Drive B223
Medley, Fl. 33166
3. The mailing address (if different):
4. Date of incorporation/qualification: Document number: P14 000097469
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)
Myrlynys Manso
8181 NW South River DR 13223
Medley, Pl. 33166
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Darcel Aquilar
7401 NW 68 St. G18
P.O. Box NOT acceptable
Miami, FL 33166
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.
Mynys Manso (president) Trinted 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.
(Manuface of Regulated Agent
If signing on behalf of an entity:
Darcel Aguilar (president)

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

Make checks payable to Florida Department of State
Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314