

P15000022330

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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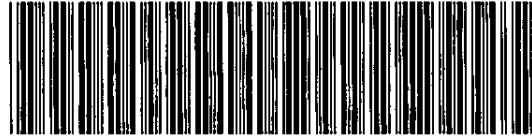
(Business Entity Name)

(Document Number)

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C. CARROTER

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: F.A.B. CONSULTING - 1 CORP.
Name of Corporation

DOCUMENT NUMBER: P15000022330

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:

FELIPE BASSI
Name of Contact Person

F.A.B. CONSULTING - 1 CORP.
Firm/Company

3900 NW 79 AVE # 807
Address

DONAL FL 33166
City/State and Zip Code

FB CONSULTING1@GMAIL.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

FELIPE BASSI at (305) 961 5306
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: F. A. B. CONSULTING-1 CORP
2. The principal office address: 4720 NW 183 ST, MIAMI FL 33055
3. The mailing address (if different): (same)
4. Date of incorporation/qualification: 03/09/2015 Document number: 15000022330
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)

4729 NW 183 ST
MIAMI FL 33055

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

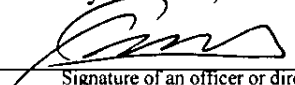
3900 NW 79 AVE # 807
DORAL FL 33166

P.O. Box NOT acceptable

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TALLAHASSEE, FLORIDA

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

FELIPE BASSI P.
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

03/16/2015
Date

If signing on behalf of an entity:

Felipe Bassi P.
Typed or Printed Name

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