

P15000048652

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

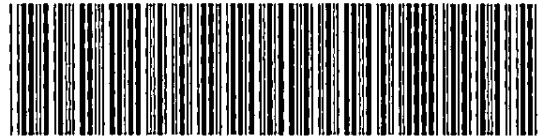
(Document Number)

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DIVISION OF CORPORATIONS  
18 OCT 22 AM 10:11

*RA office change*

OCT 25 2018

D CUSHING

## COVER LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: TOW-RES TOWING  
Name of Corporation

DOCUMENT NUMBER: P15000048652

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:

Helmer Acevedo  
Name of Contact Person

TOW-RES TOWING  
Firm/Company

10.000 SW 14th ST  
Address

Pembroke Pines Florida 33025  
City/State and Zip Code

marro913@hotmail.com  
E-mail address: (to be used for future annual report notification)

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For further information concerning this matter, please call:

Helmer Acevedo at ( 954 ) 600-5236  
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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

September 11, 2018

HELMER ACEVEDO  
TOW-RES TOWING  
10000 SW 14TH ST  
PEMBROKE PINES, FL 33025

SUBJECT: TOW-RES TOWING, INC.  
Ref. Number: P15000048652

We have received your document for TOW-RES TOWING, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you completed is to change the registered agent or office of the agent. You stated in section 5 that the current registered agent has resigned. You failed to list in section 6 the name of the new registered agent. The New Agent must sign the acceptance statement at the bottom of the page.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Diane Cushing  
Senior Section Administrator

Letter Number: 018A00018859

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2018 OCT 22 PM 2:05

SECRETARY OF STATE  
TALLAHASSEE, FL

**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 TOW-RES

Towing in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: TOW-RES TOWING

2. The principal office address: 1700 WESTWARD DRIVE  
MIAMI SPRINGS FL 33166

3. The mailing address (if different): \_\_\_\_\_

4. Date of incorporation/qualification: 06/01/2015 Document number: P15000048652

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)

10.000 SW 14th St  
Pembroke Pines FL 33025

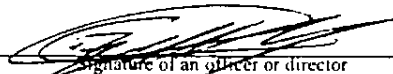
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

1700 WESTWARD DRIVE  
MIAMI SPRINGS FL 33166  
P.O. Box NOT acceptable

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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

President  
\_\_\_\_\_  
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

\_\_\_\_\_  
Date

If signing on behalf of an entity:

\_\_\_\_\_  
Typed or Printed Name

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