P15000067638

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

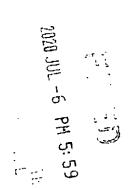
Office Use Only



900347268529

07/06/20--01998--002 **8S.00

S TALL FN' -AUG 2 0 2020



M. C.

COVER LETTER

TO:

Amendment Section Division of Corporations

SUBJECT: NECH SERVICES INC. Name of Corporation	
DOCUMENT NUMBER: P15000067638	
The enclosed Statement of Change of Registered	d Office/Agent and fee are submitted for filing.
Please return all correspondence concerning this	s matter to the following:
ANA PORTILLO	
Name of Contact Person	
NECH SERVICES INC.	
Firm/Company	
11803 SW 203RD ST	
Address	
MIAMI/ FLA/ 33177	
City/State and Zip Code	·
ANNIBONI@YAHOO.COM	1
E-mail address: (to be used for future annua	l report notification)
For further information concerning this matter, p	please call:
ANA PORTILLO	at (786 \ \760-9114
Name of Contact Person	at (786)760-9114 Area Code & Daytime Telephone Number
Enclosed is a \$35.00 check made payable to the	Department of State.
Mailing Address: Amendment Section	Street Address:
	Amendment Section
Division of Corporations P.O. Box 6327	Division of Corporations The Centre of Tallahassee
Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

CR2E045 (04/13)

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

- <u></u> -		or registered agent, or both, in the Sta	ute of Florida.
1. The name of	the corporation: NECH SERVICE	S INC	
2. The principal	office address: 11803 SW 203RD	ST, MIAMI, FLA. 33177	
	address (if different):		
4. Date of incor	poration/qualification: JUNE 30T	11 2020 O [] [] Document number: PI	50000067638
5. The name and		istered agent and registered office on	file with the
	ANA PORTILLO		
	11803 SW 203RD ST		
	MIAMI, FLA. 33177	***	<u></u>
6. The name and (if changed):	d street address of the new registe	ered agent (if changed) and /or registe	ered office
	NERI CABRERA		
	24438 SW 108TH AVENUE		5
		P.O. Box NOT acceptable	PE
	HOMESTEAD, FLA. 33032		
The street addr as changed wil	ess of its registered office and the identical.	e street address of the business offic	ce of its registered agent?
Such change wanthorized by t	as authorized by resolution duly he board, or the corporation has	adopted by its board of directors or been notified in writing of the change	by an officer so
andi	(allth	ANA PORTILLO	P
	ire of an officer or director	Printed or typed nai	
I further agree of my duties, a document is be	to comply with the provisions of nd I am familiar with and accept	ngent and agree to act in this capaci fall statutes relative to the proper a t the obligation of my position as res nge in the registered office address, change.	nd complete performance vistered avent. Or. if this
Doch	γ	JUNE, 30TH 2020	
Sig	guature of Registered Agent	Date	
If signing on bo	chalf of an entity:		
-	Typed or Printed Name	_	

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

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