P15000014157

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	ty/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Business Entity Name)		
(Document Number)		
Certified Copies		of Status
Special Instructions to Filing Officer:		





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COVER LETTER

TO:

Amendment Section Division of Corporations

SUBJECT. FRS HAULING INC

Name of Corporation

_P15000074157

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:

FELIX O RANGEL

Name of Contact Person

FRS HAULING INC

Firm/Company

1575 DONNA RD

Address

WEST PALM BEACH

City/State and Zip Code

FRSHAULINGWPB@GMAIL.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

FELIX O RANGEL

,561 291-402

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 statement of change is submitted for a corporation of in order to change its registered office or re	
1. The name of the corporation: FRS HAULING	
3. The mailing address (if different):	
4. Date of incorporation/qualification: 09/03/201	5 Document number: P15000074157
5. The name and street address of the current register Florida Department of State: (If resigned, enter res	red agent and registered office on file with the
FELIX O RANGEL	
1575 DONNA RD	T SEC TO
WEST PALM BEACH, FL	_33409
6. The name and street address of the new registered (if changed):	agent (if changed) and /or registered office
BRANDON RANGEL	
1575 DONNA RD	······································
WEST PALM BEACH, FL	NOT acceptable _ 33409
The street address of its registered office and the stras changed will be identical.	reet address of the business office of its registered agent,
Such change was authorized by resolution duly ado authorized by the board, or the corporation has been	
	Felix O Rangel
Signature of the officer of director I hereby accept the appointment as registered agen. I further agree to comply with the provisions of all performance of my duties, and I am familiar with at agent. Or, if this document is being filed merely to hereby confirm that the corporation has been notification.	statutes relative to the proper and complete nd accept the obligation of my position as registered reflect a change in the registered office address. I
Leavent -	1-21-16
Signature of Rogistered Agent	Date
If signing on behalf 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 * * *