

P15000098350

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

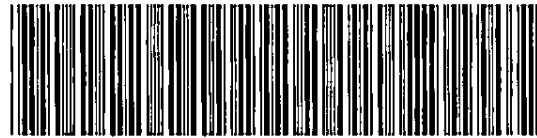
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only

6383 -



500306183395

12/05/17--01022--021 **35.00

2017 DEC 26 AM 11:31

FILED

C. GOLDEN

DEC 27 2017

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: CEPHAS INTERNATIONAL DEVELOPMENT, INC.
Name of Corporation

DOCUMENT NUMBER: P15000098350

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:

VIJAY BOMBAYWALA
Name of Contact Person

FINANCIAL SERVICE CENTER
Firm/Company

4550 JIMMY CARTER BLVD
Address

NORCROSS, GA 30093
City/State and Zip Code

vijay@financialservicecenter.net
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

CRAIG J. DILLON at (770) 561-1965
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

December 6, 2017

VIJAY BOMBAYWALA
4550 JIMMY CARTER BOULEVARD
NORCROSS, GA 30093

SUBJECT: CEPHAS INTERNATIONAL DEVELOPMENTS INC
Ref. Number: P15000098350

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

Florida law does not allow a business entity to designate a registered agent outside the State of Florida.

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.

Claretha Golden
Regulatory Specialist II

Letter Number: 917A00024608

RECEIVED
17 DEC 26 PM 12:32
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA 32314

**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: CEPHAS INTERNATIONAL DEVELOPMENTS, INC.
2. The principal office address: 3154 EL CAMINO REAL, WEST PALM BEACH, FL 33409
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 12/08/2015 Document number: P15000098350

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)

MICHAEL L. CEASER

1840 SOUTHSIDE BLVD. BLDG#2

JACHSONVILLE, FL 32216

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

CRAIG DILLON

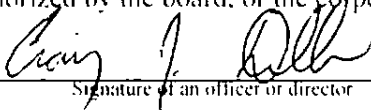
3154 EL CAMINIO REAL

P.O. Box NOT acceptable

WEST PALM BEACH, FL 33409

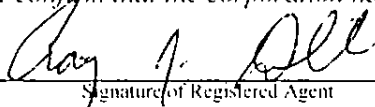
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

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

CRAIG J. DILLON
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

12/19/2017
Date

If signing on behalf of an entity:

CRAIG DILLON

Typed or Printed Name

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

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

FILED
2017 DEC 26 AM 11:32