P16000005272

(Re	questor's Name)	
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(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
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JUN 28 2016

C LEWIS

COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Art Work Remodeling Inc. Name of Corporation
DOCUMENT NUMBER: P1600005272
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:
Gretel Costa Name of Contact Person Art World Remodeling Inc. Firm/Company
7665 S.W. 2nd St.
Miami, FL 33144 City/State and Zip Code!
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Name of Contact Person at (786) 338-1648 Area Code & Daytime Telephone Number
Enclosed is a \$35.00 check made payable to the Department of State.

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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

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: Art World Remodeling Inc. 2. The principal office address: 7665 SW 2 rd St. Miami, Florida 331
3. The mailing address (if different):
4. Date of incorporation/qualification: 01-10-16 Document number: P16000005272
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)
Gretel Costa - 7665 S.W. 2nd St. Hiami, FL 33144 - President
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed): Rudy Hidalgo-Gato - 7665 SW 2 ^M St. No. Box NOT acceptable P.O. Box NOT acceptable
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. Sign are of an officer or director Crete Costa-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 6-20-16 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
CR2E045 (03/12)

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