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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

SUBJECT: Home One Flooring Contractors Corp.

Name of Corporation

DOCUMENT NUMBER

P16000008394

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:

## Diana Acosta

Name of Contact Person

Home One Flooring Contractors Corp.

Firm/Company

19101 Mystic Pointe Dr. # 1906

Address

Aventura Fl. 33180

City/State and Zip Code

acosta@homeonecontractors.com

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

For further information concerning this matter, please call:

Diana Acosta

..786

303-0224

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

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508. or 617.1508. Florida Statutes, this inge is submitted for a corporation organized under the laws of the State of Florida r to change its registered office or registered agent, or both, in the State of Florida.
1. The name of t	the corporation: Home One Flooring Contractors Corp.
2. The principal Doral F. 3	office address: 2441 NW 93rd Ave #104B
	a, Fl. 33180
4. Date of incorp	poration/qualification: January 25, 2016 Document number: P1600008394
	d street address of the current registered agent and registered office on file with the timent of State: (If resigned, enter resigned)
	Hugo A Acosta
	19101 Mystic Pointe Dr. 1906
	Aventura Fl. 33180
6. The name and (if changed):	I street address of the new registered agent (if changed) and /or registered office
	2441 NW 93rd Ave. # 104B
	Doral, Fl. 33172
	P.O. Box NOT acceptable
The street addreas changed will	ess of its registered office and the street address of the business office of its registered agent, be identical.
Such change was authorized by the	as authorized by resolution duly adopted by its board of directors or by an officer so he board, or the corporation has been notified in writing of the change.
Signatu	Te of an officer or director  Diona 7. Acosta / V.P.  Printed or typed name and title
I furthér agrée i performance of	the appointment as registered agent and agree to act in this capacity. to comply with the provisions of all statutes relative to the proper and complete my duties, and I am familiar with and accept the obligation of my position as registered is document is being filed merely to reflect a change in the registered office address, I that the corporation has been notified in writing of this change.
Sig	nature of Registered Agent Date
If signing on be	half of an entity:
T	yped or Printed Name

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