

P160000 13480

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

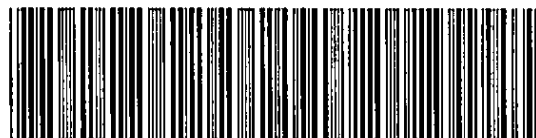
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



300303302673

09/22/17--01014--006 \*\*35.00

CLERK OF COURT  
TALLAHASSEE, FLORIDA

SEP 22 P 2 10

FILED

SEP 25 2017

RA

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Di Papas, Inc.  
Name of Corporation

**DOCUMENT NUMBER:** P 16000013480

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:

Luis Torres  
Name of Contact Person

Di Papas, Inc.  
Firm/Company

9871 N Kendall DR.  
Address

Miami, FL 33176  
City/State and Zip Code

di papasitalian@gmail.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Luis Torres at ( 305 ) 271-5441  
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, 617.0502, 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: Di Papas Inc.
2. The principal office address: 9207 SW 148 Ct.  
Miami, FL 33196
3. The mailing address (if different): 9207 SW 148 Ct.  
Miami, FL 33196
4. Date of incorporation/qualification: Feb. 9, 2016 Document number: P16 000013480
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)
- Luis Torres - President  
9207 SW 148 Ct.  
Miami, FL 33196

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

Radames Chamizo  
9207 SW 148 Ct.  
P.O. Box NOT acceptable  
Miami, FL 33196

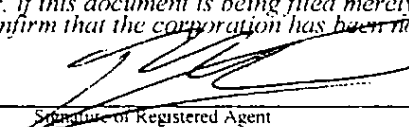
The street address of its registered office and the street address of the business office of its registered agent as changed will be identical.

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

Luis Torres  
\_\_\_\_\_  
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

8/18/17  
\_\_\_\_\_  
Date

If signing on behalf of an entity:

Luis Torres  
\_\_\_\_\_  
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  
CR2E045 (03/12)