P16000034318

(Re	equestor's Name)			
(Ad	dress)			
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(Document Number)				
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SECRETARY OF STATE



COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: PM Universal Enterprises, Co

Name of Corporation

DOCUMENT NUMBER: P16000034318

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:

Pablo J Masis

Name of Contact Person

PM Universal Enterprises, Co.

Firm/Company

7312 W 29th Way

Address

Hialeah, FL 33018

City/State and Zip Code

pablojmasis@gmail.com

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

For further information concerning this matter, please call:

Pablo J. Masis

,305

458-0964

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

CR2E045 (03/12)

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

	provisions of sections 607.0502, 617.050 ange is submitted for a corporation organ			
in orde	er to change its registered office or regist	ered agent, or both, in the State of Fl	orida.	
1. The name of	the corporation: PM Universal Ent	erprises, Co.		
2. The principal	office address: 7312 W 29th Way	, Hialeah, FL 33018		
3. The mailing a	address (if different):			
4 Date of incor	poration/qualification: 04/11/2016	Document number: P16000	0034318	
5. The name and	d street address of the current registered a rtment of State: (If resigned, enter resign	agent and registered office on file with		
	Viviana M. Mieles			
	8711 Stirling Rd			
	Cooper City, FL 33328			
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):				
	Viviana M. Mieles	AHA:		
	7312 W 29th Way	Sign Sign Sign Sign Sign Sign Sign Sign	8	
	P.O. Box NO	Facceptable Co		
The street addr	ess of its registered office and the street be identical.	address of the business office of its	registered agent,	
Such change wanthorized by the	as authorized by resolution duly adopted he board, or the corporation has been no	I by its board of directors or by an obtilied in writing of the change.	fficer so	
Talle	Ite of an officer or director	Pablo J. Masis VP		
I hereby accept I further agree performance of	the appointment as registered agent an to comply with the provisions of all stat my duties, and I am familiar with and a is document is being filed merely to refi that the corporation has been notified i	nd agree to act in this capacity. Succept the obligation of my position is	lete as registered	
_ G	5000	07/12/2016		
_	nature of Registered Agent	Date		
If signing on be	chalf of an entity:			
1	yped 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 * * *