

PK0000061410

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

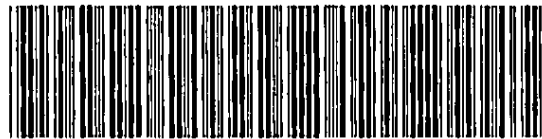
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



800302707328

08/21/17--01023--009 **35.00

2017 AUG 21 P 12:32
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

AUG 24 2017

T. T. EMERSON

NAHO

COVER LETTER

TO: ~~Amendment~~ Section
Division of Corporations

SUBJECT: Camat Construction ,INC
Name of Corporation

DOCUMENT NUMBER: P16000061410

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:

jorge morell

Name of Contact Person

Raul Morell

Firm/Company

246 Cypress Ln Apt 6

Address

Palm Springs FL 33461

City/State and Zip Code

jvresidential services @ yahoo . com

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

For further information concerning this matter, please call:

Jorge Morell

Name of Contact Person

at (561) 601 1614

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: Camat Construction Inc

2. The principal office address: 246 Cypress Ln Apt 6 Palm Springs
Florida 33461

3. The mailing address (if different): _____

4. Date of incorporation/qualification: 07/22/2016 Document number: P16000061410

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)

Legal Corp Solutions, LLC
3440 W Hollywood Blvd Suite 415
Hollywood FL 33021

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

Raul Horell Samper
246 Cypress Ln Apt 6
P.O. Box NOT acceptable
Palm Springs FL 33461

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

Raul Horell Samper
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

08/11/17
Date

If signing on behalf of an entity:

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)