## P16000072842

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Duninger Entity Nove)				
(Business Entity Name)				
(Document Number)				
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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

Name of Corporation
P16000072842

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:

Albert Bazaev

Name of Contact Person

IRON MOVERS INC

Firm/Company

200 177th DR, #212

Address

SUNNY ISLES BEACH, FL 33160

City/State and Zip Code

ironmoversinc@gmail.com

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

For further information concerning this matter, please call:

Albert Bazaev 2

,<sub>(</sub>267 \577-1444

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, 617.0. nge is submitted for a corporation org r to change its registered office or regi	anized under the laws of the Sta	te of
	he corporation: Iron Mover Inc.	<b>.</b>	
2. The principal	office address: 200 177th DR, #	212	
	SUNNY ISLES	BEACH, FL 33160	
3. The mailing a	ddress (if different):		
4. Date of incorp	poration/qualification: 09/01/2016	Document number: P1	6000072842
	street address of the current registered tment of State: (If resigned, enter resigned,		file with the
	ALBERT B	BAZAEV	SFE OF PR
	200 177th D	PR, #212	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	SUNNY ISLES E	BEACH, FL 33160	
6. The name and (if changed):	street address of the new registered ag	gent (if changed) and /or register	red office
	16710 NE 9th	n AVE, #803	
	P.O. Box NOT acceptable		
	NORTH MIAMI	BEACH, FL 33162	
	ess of its registered office and the stree be identical.  Is authorized by resolution duly adopt the board, or the corporation has been to		
authorized by th	te board, or the corporation has been to		
· -		Albert Bazaev	President
I hereby accept I further agree to performance of agent. Or, if the	to of an officer or director  the appointment as registered agent of to comply with the provisions of all sta my duties, and I am familiar with and is document is being filed merely to re that the corporation has been notified	atutes relative to the proper and l accept the obligation of my po eflect a change in the registered	v. d complete sition as registered
olive.	only"	02/03/2017	
If signing on be	half of an entity:	Date	
Ty	ped 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 \* \* \*