

P1600053152

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

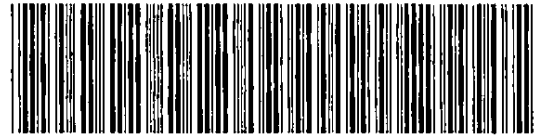
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



800300321998

06/16/17--01024--001 **35.00

Flachy
JUN 21 2017

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: DE LOS ANGELES CLEANING SERVICES INC
Name of Corporation

DOCUMENT NUMBER: P16000083152

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:

ALEJANDRO PICHARDO

Name of Contact Person

ACCOUNTING CENTER OF ORLANDO LLC

Firm/Company

1706 E SEMORAN BLVD STE 103

Address

APOPKA, FL 32703

City/State and Zip Code

APICHARDO@ACCOUNTINGORL.COM

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

For further information concerning this matter, please call:

ALEJANDRO PICHARDO at 407 574-7340

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: DE LOS ANGELES CLEANING SERVICES INC
2. The principal office address: 314 MARION OAKS COURSE, OCALA, FL 34473
3. The mailing address (if different): 314 MARION OAKS COURSE, OCALA, FL 34473
4. Date of incorporation/qualification: 10/12/2016 Document number: P16000083152
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)

ANA I LORENZO

5440 SE ABSHIER BLVD

BELLEVIEW, FL 34420

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

ACCOUNTING CENTER OF ORLANDO

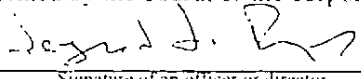
1706 E SEMORAN BLVD STE 103

P.O. Box NOT acceptable

APOPKA, FL 32703

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

SEGUNDO F. REYES

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

06/06/2017

Date

If signing on behalf of an entity:

ALEJANDRO PICHARDO

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