

P16000097944

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

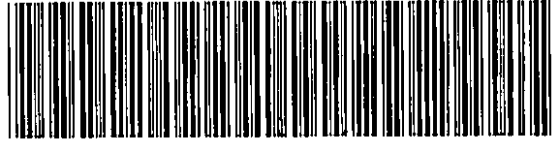
(Business Entity Name)

(Document Number)

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2018 NOV 30 P 4 56
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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: AMBA Services, INC.
Name of Corporation

DOCUMENT NUMBER: P16000097944

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:

Andia Dinesen

Name of Contact Person

AMBA Services, INC.

Firm/Company

11601 Roosevelt Blvd. N #94

Address

St. Petersburg, FL 33716

City/State and Zip Code

Andia.Dinesen@ambahq.org

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

For further information concerning this matter, please call:

Andia Dinesen

Name of Contact Person

at (540) 347-3305

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: AMBA Services, INC.
2. The principal office address: 11601 Roosevelt BLVD N #94 St. Petersburg, FL 33716
3. The mailing address (if different): 6696 Hanson Ln Lorton, VA 22079
4. Date of incorporation/qualification: 12/12/2016 Document number: P16000097944
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)

Paracorp Incorporated
236 East 6th Avenue
Tallahassee, FL 32303

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

Paracorp Incorporated
155 Office Plaza Dr
Tallahassee, FL 32301
P.O. Box NOT acceptable

2018 NOV 30 P 6 56
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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]
Signature of an officer or director

Andia Dinesen, Executive Director
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]
Signature of Registered Agent

11/26/18
Date

If signing on behalf of an entity:

Jody Moya, Asst. Secretary
Typed or Printed Name

*** FILING FEE: \$35.00 ***