

P17000016303

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

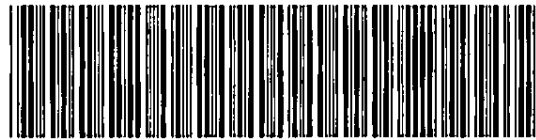
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

RA Change form

Office Use Only



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08/19/22--01004--010 **35.00

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2023 JAN 23 PM 1:20
SECRETARY OF STATE
BOSTON, MASS. 02108

RA Change

FEB 03 2023

D CUSHING

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: MACR EXPRESS INC.

Name of Corporation

DOCUMENT NUMBER: P17000016303

The enclosed Articles of Correction and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

MARCO AURELIO CAETANO REIS

Name of Contact Person

MACR EXPRESS INC.

Firm/Company

19725 ROCK HAVEN LANE

Address

VENICE - FL 34293

City/State and Zip Code

macr_express@hotmail.com

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

For further information concerning this matter, please call:

ZILMA FERRAO

at (404) 4681003

Name of Contact Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

☐ \$35.00 Filing Fee

☐ \$43.75 Filing Fee & Certificate of Status

☐ \$43.75 Filing Fee & Certified Copy

☐ \$52.50 Filing Fee, Certificate of Status & Certified Copy

Mailing Address:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

2023 JAN 23 PM 4:20

FILED



FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 5, 2022

MARCO AURELIO CAETANO REIS
MACR EXPRESS INC
19725 ROCK HAVEN LANE
VENICE, FL 34293

SUBJECT: MACR EXPRESS INC
Ref. Number: P17000016303

We have received your document for MACR EXPRESS INC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s).

You need to complete the registered agent change form. See attached.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Diane Cushing
Senior Section Administrator

Letter Number: 922A00026892

www.sunbiz.org

Division of Corporations - P.O. BOX 6327 - Tallahassee, Florida 32314

2023 JAN 23 PM 12:53

**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: MACR EXPRESS INC
2. The principal office address: 19725 ROCK HAVEN LANE
VENICE - FL - 34293
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 02/17/2017 Document number: P17000016303
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)

REIS CAETANO, MARCOS A

3615 DUNBAR DR.

SARASOTA, FL 34232

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

MARCO AURELIO CAETANO REIS

19725 ROCK HAVEN LANE

P.O. Box NOT acceptable

VENICE - FL 34293

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

MARCO A. CAETANO REIS - PRESIDENT

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

01/06/2023

Date

If signing on behalf of an entity:

MARCO AURELIO CAETANO REIS

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 (04/13)

FILED
2023 JAN 23 PM 4:00
TALLAHASSEE
SECRET