

PI7000020742

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

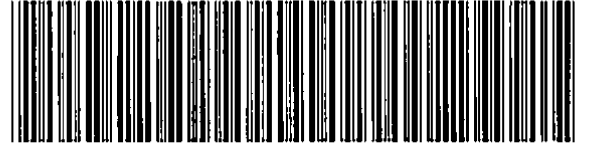
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



200331265982

07/08/19--01011--018 **35.00

FILED

19 JUL - 8 PM 1:55

SECRETARY OF STATE
TALLAHASSEE FLORIDA

JUL 18 2019

T SCHROEDER

COVER LETTER

TO: Amendment Section
Division of Corporations

Vital Roofing Inc.

SUBJECT: _____
Name of Corporation

P17000020742

DOCUMENT NUMBER: _____

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:

Julio C. Rubio

Name of Contact Person

Firm/Company

244 NW 119 Dr

Address

Coral Springs FL 33071

City/State and Zip Code

jrubio@vitalroofing.com

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

For further information concerning this matter, please call:

Yeci

954

609-3109

Name of Contact Person

at (_____)

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 _____ in order to change its registered office or registered agent, or both, in the State of Florida.

- 1. The name of the corporation: Vital Roofing Inc.
2. The principal office address: 859 NE 38 Street Oakland Park FL 33334
3. The mailing address (if different):

4. Date of incorporation/qualification: 03/03/2017 Document number: P17000020742

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)

Yecenia L Santibanez
320 NE 36 Street Oakland Park FL 33334

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

Julio C Rubio
859 NE 38 Street Oakland Park FL 33334

P.O. Box NOT acceptable

SECRETARY OF STATE
FAIR ASSURANCE, FLORIDA

19 JUL -8 PM 1:57

FILED

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

Julio Rubio
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

6/28/19
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