

P170000024878

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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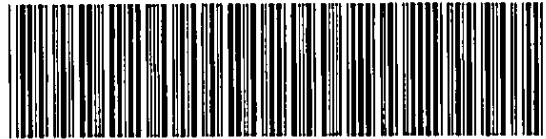
(Business Entity Name)

(Document Number)

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2018 DEC 17 PM 12:52

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DEC 27 2018

ALBRITTON

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: JOSE RIVERO ZAPATA, INC.
Name of Corporation

DOCUMENT NUMBER: P17000024878

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:

Jose Rivero Zapata

Name of Contact Person

JOSE RIVERO ZAPATA, INC.

Firm/Company

4112 Las Vegas Dr.

Address

New Port Richey FL 34653

City/State and Zip Code

joseriverozapata@hotmail.com

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

For further information concerning this matter, please call:

Jose Rivero Zapata

Name of Contact Person

at (727) 645-2009

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: JOSE RIVERO ZAPATA, INC.
2. The principal office address: 4112 Las Vegas Dr. NPR FL 34653
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 03-16-2017 Document number: P17000024878
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)

Jose Rivero Zapata

4112 Las Vegas Dr.

New Port Richey, FL 34653

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

Luis Alfonso Garcia Mendoza

12800 Vassar Ct

P.O. Box NOT acceptable

Hudson FL 34667

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.

Jose Rivero Z
Signature of an officer or director

Jose Rivero Zapata, Pres

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

12-10-18
Date

If signing on behalf of an entity:

Typed or Printed Name

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