

# PIN000028078

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

(Business Entity Name)

(Document Number)

08/25/18--01011--011 \$45.00

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only

Reaching

R. WHITE  
OCT 18 2018

FILED  
2018 OCT -5 AM 7:16  
SECRETARY OF STATE  
TALLAHASSEE, FL



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

October 1, 2018

IVAN D HERNANDEZ  
5001 SW 20TH ST APT 4605  
OCALA, FL 34474

SUBJECT: SOLAR WORLD INC  
Ref. Number: P17000028078

We have received your document for SOLAR WORLD 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):

Section 6 cannot be left blank. Please complete section 6 with the new registered agent's information.

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.

Rebekah White  
Regulatory Specialist II

Letter Number: 518A00020324

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** SOLAR WORLD INC  
Name of Corporation  
P17000028078  
**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:

Ivan Hernandez  
Name of Contact Person  
Solar World Inc  
Firm/Company  
5001 SW 20th St apt 4605  
Address  
Ocala, Florida 34474  
City/State and Zip Code  
hernandezivandario@gmail.com  
E-mail address: (to be used for future annual report notification)

RECEIVED  
2018 OCT 15 PM 2:20  
SECRETARY OF STATE  
TALLAHASSEE, FL

For further information concerning this matter, please call:

Ivan Hernandez at 908 937-8187  
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.*

**SOLAR WORLD INC**

1. The name of the corporation: SOLAR WORLD INC
2. The principal office address: 5001 SW 20TH ST APT 4605  
Ocala, Florida 34474
3. The mailing address (if different): N/A

4. Date of incorporation/qualification: 05-17-2017 Document number: P17000028078

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)

**BUSINESS FILINGS INCORPORATED**

1200 SOUTH PINE ISLAND ROAD

PLANTATION, FL 33324

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

Ivan Hernandez

5001 SW 20th St apt 4605

P.O. Box NO I acceptable

Ocala, Florida 34474

SECRET  
TALLAHASSEE  
FL

2018 OCT -5 AM 7:16

**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

Printed or typed name and title

IVAN HERNANDEZ

*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

10-01-2018

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