

P7000 48610

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

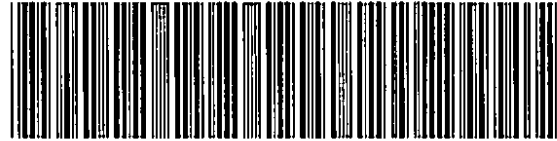
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



100301345541

07/17/17--01008--021 **35.00

S TALLENT

JUL 20 2017

R/A-CH

FILED
17 JUL 17 PM 1:45
CLERK OF SUPERIOR COURT

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Tele-Direct Inc

Name of Corporation

DOCUMENT NUMBER: P17000048610

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:

Peter Roussonicolos

Name of Contact Person

Tele-Direct Inc

Firm/Company

540 S E 6th St

Address

Fort Lauderdale FL 33301

City/State and Zip Code

teledirectinc@gmail.com /

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

For further information concerning this matter, please call:

Peter Roussonicolos

Name of Contact Person

at (917) 530-3371

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: Tele-Direct Inc
2. The principal office address: 540 SE 6th St
Fort Lauderdale Fl 33301
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 06/01/17 Document number: P17000048610

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)

David Luger

540 SE 6th St

Fort Lauderdale Fl 33301

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

Peter Roussonicolos

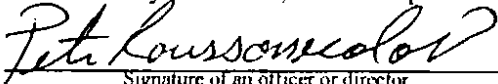
540 SE 6th St

P.O. Box NOT acceptable

Ft Lauderdale Fl 33301

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.

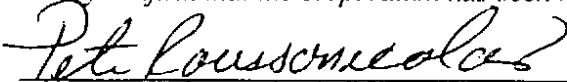


Signature of an officer or director

Peter Roussonicolos 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

07/11/17

Date

If signing on behalf of an entity:

Peter Roussosnicolos

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 (03/12)

FILED
17 JUL 17 PM 1:45
TALLAHASSEE FLORIDA