## P17000066184

(Requestor's Name)					
(Address)					
,					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
(Bocament Hamber)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					
Special management.					





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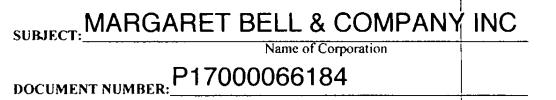
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OCT 11 2017

## COVER LETTER

TO:

Amendment Section Division of Corporations



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:

**BRAXTON BELL** 

Name of Contact Person

MARGARET BELL & CO INC

Firm/Company

834 NW 112TH ST

Address

MIAMI, FL 33168

City/State and Zip Code

MBELLCO.INC@GMAIL.COM

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

For further information concerning this matter, please call:

BRAXTON BELL

MOCT TO THE SP.

Name of Contact Person

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

	provisions of sections 607.0502, 617.050. ange is submitted for a corporation organi	1		
	er to change its registered office or registe			<del></del>
1. The name of	the corporation: MARAGRET BEL	L & COMPANY	INC	
2. The principal	office address: 834 NW 112TH S	Γ		
				<b>-</b>
3. The mailing	address (if different):			
4. Date of incor	poration/qualification: AUGUST 20	17 Document numbe	<sub>r:</sub> P170000661	84
	d street address of the current registered ag	_	ce on file with the	
	MARGARET BELL			
	834 NW 112TH ST			
	MIAMI, FL 33168		· · · · · · · · · · · · · · · · · · ·	
MIAMI, FL 33168  6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):				
	BRAXTON BELL			名の
	834 NW 112TH ST			2 2 3 3
	P.O. Box NOT	acceptable		.5
The street addr as changed will	ess of its registered office and the street a	address of the business	office of its register	ed agent,
Such change w authorized by t	as authorized by resolution duly adopted he board, or the corporation has been not	by its board of director ified in writing of the c	s or by an officer so hange.	,
may	graph Bell ure of an officer or director	MARGARET BE	TLL If name and title	<del></del>
- I further agree - performance of	t the appointment as registered agent and to comply with the provisions of all statu my duties, and I am familiar with and ac is document is being filed merely to refle That the corporation has been notified in	tes relative to the prop ecent the obligation of i	er and complete no position as regist	tered s, I
Sign	enature of Registered Agent	10/04/2017	de .	· · · · · · · · · · · · · · · · · · ·
	chalf of an entity:			
Braxe	yped or Printed Name			

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

Make theory payari eto Florida Department de State