PM000078682

(Re	questor's Name)			
(Add	dress)			
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(Cit	y/State/Zip/Phone			
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PICK-UP	☐ WAIT	MAIL		
(Bu	siness Entity Name	e)		
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<u>/Da</u>	cument Number)			
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Certified Copies Certificates of Status				
Special Instructions to				
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COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: Guajiro Painting Services Inc
Name of Corporation

DOCUMENT NUMBER: P17000078682

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 Penton

Name of Contact Person

Guajiro Painting Services Inc

Firm/Company

15341 SW 36 Terr.

Address

Miami, Florida 33185

City/State and Zip Code

oadri13@gmail.com

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

For further information concerning this matter, please call:

Julio Penton 280-4

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

•	provisions of sections 607.0502, 6 inge is submitted for a corporation					_
in orde	r to change its registered office or	registered agent,	or bot	h, in the State of	^c Florida.	
1. The name of	the corporation: Guajiro Paint	ting Services	s Inc			
2. The principal	office address: 15341 SW 36	6 Terrace				_
	Miami, FL. 3					
3. The mailing a	nddress (if different):		<u> </u>			
4. Date of incorp	poration/qualification: 09/29/20	017 _{Doc}	ument	number: P170	00078682	
	d street address of the current regis rtment of State: (If resigned, enter	•	egistere	ed office on file v	with the	
	Jose A. Gonzalez				_	
	15629 SW 73 Circle Te	err., Apt.# 91	1		-	
	Miami, FL. 33193				_	
6. The name and (if changed):	d street address of the new register	ed agent (if chang	ged) and	d /or registered c	office	
	Ricardo Cuesta	.				
	2447 W 6 Th Court				N II	
	Hialeah, FL. 33010	Box NOT acceptable		; 1		EO
The street address changed will	ess of its registered office and the be identical.	street address of	the bu	siness office of	its registered agei	nt,
Such change was authorized by the	s authorized by resolution duly a board or the corporation has be	dopted by its boa een notified in wi	rd of d	irectors or by ar of the change.	officer so	
* Yft	Dt7Q	Julio F		n, Presiden		_
I further agree of performance of agent. Or, if the	the appointment as registered ag to comply with the provisions of a my duties, and I am familiar with is document is being filed merely that the corporation has been not	ill statutes relativ and accept the o to reflect a chang	act in the solution of the sol	e proper and co ion of my positic ie registered offi	mplete on as registered	
NAME Sig	nature of Registered Agent	_11	29	Date		-
U	half of an entity:	•	•			
T	yped or Printed Name					

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

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