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COVER LETTER

TO:

Amendment Section Division of Corporations

Securebroker Co

Name of Corporation

DOCUMENT NUMBER, P1800000331

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:

Hector Luis Moreno

Name of Contact Person

Securebroker Co

Firm/Company

4803 NW 7th St. Apt # 305

Address

Miami, FL 33126

City/State and Zip Code

morenolhector@yahoo.com

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

For further information concerning this matter, please call:

Hector Luis Moreno

., 305 、

3380327

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

statement of cha	mge is submitte	d for a corp	oration organi:	. 607.1508, or 617.15 sed under the laws of red agent, or both, in		
1. The name of	the corporation:	Secureb	roker Co	-	,	
2. The principal	office address:	4803 NV	V 7th St. Ap	ot # 305 Miami,	FI 33126	
3. The mailing a	uddress (if differ	rent):				
4. Date of incor	poration/qualifi	cation: 01/	02/2018	Document numb	p1800000331	
	d street address trent of State:			ent and registered off)	fice on file with the	
	Sr. Hector	Luis Moi	reno			
	4803 NW	7th St. A	ot # 305			
	Miami, Fl	33126				
6. The name and (if changed):				(if changed) and /or	registered office	
	Hector Lui					
	4803 NW	7th St. Ap				
	Miami, Fl	33126	P.O. Box NOT a	cceptable		
	ess of its registe be identical.	ered office a			s officerot its registered agen	t, į
authorized by the	as authorized by ne board, or the	y resolution corporation	duly adopted in has been noti	fied in writing of the	ors or by an officer so change	•
/-	/ /			Hector	LUB Mareno	
I hereby accept I further agree performance of	to comply with mv duties, and	nt as registe the provisio I am famili	ns of all statut ar with and ac	agree to act in this c es relative to the pro cept the obligation o	apacity 25	
/~	<u> </u>			02/06/2018		
_	nature of Registered	•	- -		Date	
If signing on be	·	y:				
Hector Luis						
T	yped or Printed Nam	ıe				

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