

P18000038580

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

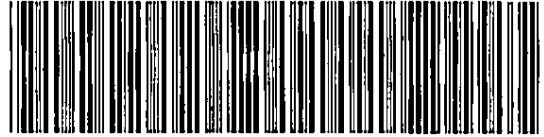
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2019 JAN 25 AM 10:37

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Mega Management and Services, Inc
Name of Corporation

DOCUMENT NUMBER: P18000038580

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 J. Parra Hernandez

Name of Contact Person

N/A

Firm/Company

4740 NW 102nd Avenue Apto. 207

Address

Doral, FL 33178

City/State and Zip Code

hparra9000@gmail.com

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

For further information concerning this matter, please call:

Hector J Parra

Name of Contact Person

at (786) 806-8242

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

2018 JAN 25 AM 10:37
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**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: Mega Management and Services, Inc
2. The principal office address: 4740 NW 102nd Avenue Apto. 207 Doral, FL 33178

3. The mailing address (if different): N/A

4. Date of incorporation/qualification: 04/30/2018 Document number: P18000038580

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)

QUINTERO & ASOCIADOS DESPACHO DE ABOGADOS
2200 NW 72ND AVE. #523223 MIAMI, FL 33152

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

Hector J. Parra Hernandez

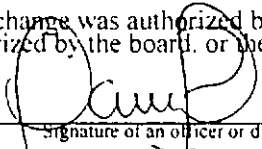
4740 NW 102nd Avenue Apto. 207

P.O. Box NOT acceptable

Doral, FL 33178

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.

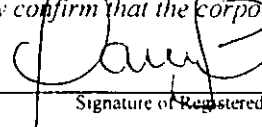


Signature of an officer or director

Hector J. Parra Hernandez-VP

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

01/08/2019

Date

If signing on behalf of an entity:

Hector J. Parra Hernandez

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)

2019 JAN 25 AM 10:31
SECRETARY OF STATE
TALLAHASSEE, FL 32314