## P15000039260

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## **COVER LETTER**

TO:	Amendment Section
	Division of Corporations

Carlos Pascual, P.A.

Name of Corporation

P18000039260

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:

## Carlos Jose Pascual Name of Contact Person Carlos Pascual, P.A. Firm/Company 13194 SW 19th Terrace Address Maimi, FL 33175 City/State and Zip Code

carlos.pascual06@gmail.com

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

For further information concerning this matter, please call:

Carlos Jose Pascual

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

1. The name:	of the corporation: Carlos Pascual,	P.A.
7. The name i	pal office address: 13194 SW 19th	Terrace
	Miami, FL 33175	; 
3. The mailin	g address (if different):	
4. Date of inc	corporation/qualification: 04/25/201	8 Document number: P18000039260
	and street address of the current registered partment of State: (If resigned, enter resign	agent and registered office on file with the ned)
	Carlos Jose Pascual	
	13194 SW 19th Terrace	
	Miami, FL 33175	
6. The name a		ent (if changed) and /or registered office
	Carlos Jose Pascual	Of acceptable
	. 13150 SW 21st Street	
	Miami, FL 33175	с
The street add as changed w	dress of its registered office and the street ill be identical.	t address of the business office of its registered agent
	was authorized by resolution duly adopted the board, or the corporation has been no	d by its board of directors or by an officer so officed in writing of the change.
Such change authorized by	million	Carlos Jose Pascual, President
6	ature of an officer or director	Printed or tropped printed that a
Sign I hereby acce I further agre performance agent Or if	naution an other or director  Ppt the appointment as registered agent ar  Pe to comply with the provisions of all stat  of my duties, and I am familiar with and a  this document is being filed merely to ref.  In that the corporation has been notified.	tutes relative to the proper and complete accept the obligation of my position as registered beet a change in the registeral office address. I
Sign I hereby acce I turber acce performance avent Or if	ept the appointment as registered agent are to comply with the provisions of all state of my duties, and I am familiar with and a this document is being filed merely to refund that the corporation has been notified.	nd agree to act in this capacity, tutes relative to the proper and complete accept the obligation of my position as registered elect a change in the registered office address. I in writing of this change.  10/01/2018
Sign I hereby acce I further agre performance agent. Or, if hereby confir	pt the appointment as registered agent are to comply with the provisions of all state of my duties, and I am familiar with and to this document is being filed merely to ref	od agree to act in this capacity, tutes relative to the proper and complete accept the obligation of my position as registered lect a change in the registered office address. I in writing of this change.

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (03/12)