

P18000054521

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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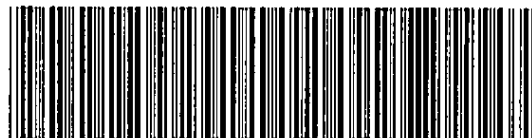
(Business Entity Name)

(Document Number)

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FLORIDA DEPARTMENT OF STATE  
Division of Corporations

October 2, 2018

ALEJANDRO MARTINEZ DOMINGUEZ  
C & C FLORIDA, INC  
15147 SW 176 TER  
MIAMI, FL 33187

SUBJECT: C&C FLORIDA, INC  
Ref. Number: P18000054521

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Susan Tallent  
Regulatory Specialist II

Letter Number: 518A00020495

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** C & C FLORIDA, INC  
Name of Corporation

**DOCUMENT NUMBER:** P18000054521

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:

ALEJANDRO MARTINEZ DOMINGUEZ

Name of Contact Person

C & C FLORIDA, INC

Firm/Company

15147 SW 176 TER

Address

MIAMI, FL, 33187

City/State and Zip Code

AHDZ73@GMAIL.COM

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

SECRETARY OF STATE  
TALLAHASSEE, FL

2018 OCT 29 PM 2:45

RECEIVED

For further information concerning this matter, please call:

ALEJANDRO MARTINEZ at ( 786 ) 4990484  
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**

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: C & C FLORIDA, INC  
2. The principal office address: 15147 SW 176 TER, MIAMI, FL 33187

3. The mailing address (if different): \_\_\_\_\_

4. Date of incorporation/qualification: june 14, 2018 Document number: p18000054521

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)

RODRIGUEZ, CARLOS A, SR

8275 SW 152 AVE APT D 307 MIAMI, FL 33193

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

ALEJANDRO MARTINEZ DOMINGUEZ

15147 SW 176 TER, MIAMI, FL 33187

P.O. Box NOT acceptable

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JUDICIAL CIRCUIT IN AND FOR  
MIAMI, FLORIDA

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.

x Chavez  
Signature of an officer or director

Carlos A. Rodriguez Perez  
Printed or typed name and title  
President

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]  
Signature of Registered Agent

10/23/18  
Date

If signing on behalf of an entity:

Alejandro Martinez  
Typed or Printed Name

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