# P18 00000 78288

(Requestor's Name)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
Certified Copies Certificates of Status		
Special Instructions to Filing Officer:		





400374340384

10/25/21--01022--028 \*\*35.00



T. LEMIEUX

#### **COVER LETTER**

Section 18 Contraction

TO: Amendment Section Division of Corporations				
SUBJECT: M & A BROTHERS REALTY NO. 12 HO Name of Corporation	LDING COMPANY, INC.			
DOCUMENT NUMBER: P18000078288				
The enclosed Statement of Change of Registered Of	ffice/Agent and fee are submitted for filing.			
Please return all correspondence concerning this matter to the following:				
ANCAD OUR AAN				
ANSAR QURAAN Name of Contact Person				
M & A BROTHERS REALTY NO. 11, INC.				
Firm/Company				
1308 EAST ATLANTIC BLVD				
Address				
POMPANO BEACH, FL 33060				
City/State and Zip Code				
ANSAR@POWERPETROINC.C	СОМ			
E-mail address: (to be used for future annual rep	port notification)			
For further information concerning this matter, please	se call:			
ANSAR QURAAN	at (561 \ \288-1710			
Name of Contact Person	at (561 ) 288-1710  Area Code & Daytime Telephone Number			
Enclosed is a \$35.00 check made payable to the Dep	partment of State.			
Mailing Address: Amendment Section	Street Address: Amendment Section			
Division of Corporations	Division of Corporations			

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

CR2E045 (04/13)

P.O. Box 6327

Tallahassee, FL 32314



#### FLORIDA DEPARTMENT OF STATE Division of Corporations

November 3, 2021

P18000078288

ANSAR QURAAN 1308 E ATLANTIC BLVD POMPANO BEACH, FL 33060

SUBJECT: M & A BROTHERS REALTY NO. 12 HOLDING COMPANY, INC.

Ref. Number: W21000143480

We have received your document for M & A BROTHERS REALTY NO. 12 HOLDING COMPANY, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The designation of the registered agent must be at a Florida street address.

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) 245-6051.

Tracy L Lemieux Regulatory Specialist II

Letter Number: 121A00026780

RECEIVED NOV 2 2 2021

### STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	nge is submitted for a corporation	517.0502, 607.1508, or 617.1508, Floi n organized under the laws of the State r registered agent, or both, in the State	e of FLORIDA
1. The name of	he corporation: M & A BROTHER	RS REALTY NO. 12 HOLDING COME	PANY, INC.
2. The principal	office address: 1308 EAST ATLAN	NTIC BLVD, POMPANO BEACH, FL	33060
3. The mailing a	ddress (if different):		
4. Date of incorp	poration/qualification: 07/23/2018	Document number: P180	000078288
5. The name and		stered agent and registered office on fi	
	SHEHADEH GIANNAMORE PL	LC	
	396 ALHAMBRA CIR STE 100A		
	CORAL GABLES, FL 33134		
6. The name and (if changed):		red agent (if changed) and /or registero	:- 21
	SHEHADEH GIANNAMORE, PL	P.O. Box NOT acceptable	167 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	620 S. LE JEUNE ROAD	P.O. Box NOT acceptable	2 7
	CORAL GABLES, FL 33134	·	
The street addreas changed will	ess of its registered office and the be identical.	street address of the business office	of its registered agent,
		adopted by its board of directors or b seen notified in writing of the change	
Mahmard	Acharth	MAHMOUD SHEHADEH, P	
Signatu	re or an officer or director	Printed or typed name	and title
I further agree : of my duties, an document is bei	the appointment as registered as to comply with the provisions of a lam familiar with and accept to gilled merely to reflect a chang been notified in writing of this contact.	gent and agree to act in this capacity all statutes relative to the proper and the obligation of my position as reginge in the registered office address, The change.	; 4 complete performance stered agent. Or, if this hereby confirm that the
Sig	nature of Registered Agent	Date	
If signing on be	half of an entity:		
r	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 \* \* \*

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	inge is submitted for a corporation orga	i02, 607.1508, or 617.1508, Florida Statutes, this mized under the laws of the State of FLORIDA stered agent, or both, in the State of Florida.		
1. The name of	the corporation: M & A BROTHERS RE	ALTY NO. 12 HOLDING COMPANY, INC.		
2. The principal office address: 1308 EAST ATLANTIC BLVD, POMPANO BEACH, FL 33060				
3. The mailing a	address (if different):			
4. Date of incorp	poration/qualification: 07/23/2018	Document number: P18000078288		
	I street address of the current registered timent of State: (If resigned, enter resign	agent and registered office on file with the ned)		
	SHEHADEH GIANNAMORE PLLC			
	396 ALHAMBRA CIR STE 100A	21		
	CORAL GABLES, FL 33134			
6. The name and (if changed):	d street address of the new registered ag	ent (if changed) and /or registered office		
	SHEHADEH GIANNAMORE, PLLC			
	620 S. LE JEUNE ROAD	· · · · · · · · · · · · · · · · · · ·		
	P.O. Box NOT acceptable			
	CORAL GABLES, FL 33134			
The street address changed will	ess of its registered office and the stree be identical.	et address of the business office of its registered agent,		
Such change wauthorized by t	as authorized by resolution duly adopt he board, or the corporation has been r	ed by its board of directors or by an officer so notified in writing of the change.		
Mahmad	Arabarth	MAHMOUD SHEHADEH, PRESIDENT		
Signati	ire of an officer or director	Printed or typed name and title		
I further agree of my duties, ar document is be	the appointment as registered agent of the comply with the provisions of all stand I am familiar with and accept the oling filed merely to reflect a change in a seen notified in writing of this chang	tuites retailve to the proper and complete performance bligation of my position as registered agent. Or, if this the registered office address, I hereby confirm that the		
Sig	gnature of Registered Agent	Date		
If signing on bo	chalf of an entity:			
	yped or Printed Name			

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