P18 0000 99 227

(Requestor's Name)
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COVER LETTER

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TO: Amendment Section Division of Corporations 2921 JUI 12 PM 1:41

SUBJECT: Name of Corporation

P180000

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:

City/State and Zip Code

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

For further information concerning this matter, please call:

SERGIO BONTEMPO

Name of Contact Person

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 The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

CR2E045 (04/13)

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

Pursyant 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
in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: MA10 PHEX GRP.
2. The principal office address: 9761 NW 915t. COURT MEDLEY, FL 33178
3. The mailing address (if different):
4. Date of incorporation/qualification: 12 5 2018 Document number: 18000099227
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) ABITOS PULC
255 ARAGON ANE 2Nd FLOOR
CORAL GABLES, FL 33134
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
SER 610 G. BONTEMPO
9948 MOSS POND DR == == == == == == == == == == == == ==
BOCA-PATON, FL 33496
The street address of its registered office and the street address of the business office of its registered agents 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 shange. Signature of an officer or director Signature of an officer or director
I hereby pocept 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 duality and familiar with and accept the obligation of my position as registered agent. Or, if this document is being Wed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.
07/09/2021
Signature of Registered Agent If signing on behalf of an entity:
Typed or Printed Name
••

Make checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 CR2E045 (04/13)

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