P19000000 602

(Re	equestor's Name)				
(Address)					
(Address)					
(Cit	ty/State/Zip/Phone	ə #)			
PICK-UP	☐ WAIT	MAIL			
(Business Entity Name)					
(Document Number)					
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COVER LETTER

TO:	Amendment Section Division of Corporations	1	
	ECT: Beeline Property Inspections Inc of Corporation	·	
DOCU	JMENT NUMBER: P19000000602		
The en	aclosed Statement of Change of Registered	d Office/Agent and fee are submitted for filing.	
Please	return all correspondence concerning this	s matter to the following:	
Ivan Re	oiz.		
Name	of Contact Person		
Beeline	e Property Inspections Inc		
Firm/C	Company	· · · · · · · · · · · · · · · · · · ·	
5846 S	. Flamingo Rd #248		
Addres	SS		
Cooper	r City, Florida 33330		
City/St	tate and Zip Code		
	info@beelinepropertyinspecti	ions.homes	
E-mai	l address: (to be used for future annual	l report notification)	
For fur	ther information concerning this matter, p	please call:	
Ivan Ro		at (754)231-4440 Area Code & Daytime Telephone Number	
	Name of Contact Person	Area Code & Daytime Telephone Number	
Enclos	ed is a \$35.00 check made payable to the	Department of State.	
	Mailing Address: Amendment Section	Street Address:	
	Division of Corporations	Amendment Section Division of Corporations	
	P.O. Box 6327	The Centre of Tallahassee	
	Tallahassee, FL 32314	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

statement of cha	provisions of sections 607.0502, 617.050 nge is submitted for a corporation orgai r to change its registered office or regist	nized under the l	aws of the State of Florida			
	he corporation: Beeline Property Inspecti	•	one in the blate of Florida.			
	office address: 5987 SW 114th Avenue ,		orida 33330			
3. The mailing a	ddress (if different): 5846 S. Flamingo R	d #248 , Cooper C	City, Florida 33330			
	poration/qualification: 01/03/2019		t number: P1900000602			
	I street address of the current registered a tment of State: (If resigned, enter resign		ered office on file with the			
	Ivan Roiz					
	5846 S. Flamingo Rd #248			m-3		
	Cooper City, Florida 33330			10 DZO JI		
6. The name and (if changed):	I street address of the new registered age	ent (if changed) a	and /or registered office	2020 JUL -6 PH		
	Ivan Roiz			2 Hd		
	5987 SW 114th Avenue			1 2: 23		
P.O. Box NOT acceptable						
	Cooper City, Florida 33330					
The street address changed will	ess of its registered office and the street be identical.	address of the l	business office of its regist	tered agent,		
Such change wa authorized by the	as authorized by resolution duly adopte ne board, or the corporation has been no	d by its board of otified in writing	f directors or by an officer g of the change.	·so		
			President			
Lharahy accent	v over i nicer or director the appointment as registered agent ar		inted or typed name and title			
I further agrée of my duties, an document is bei	to comply with the provisions of all sta id I am familiar with and accept the ob- ing filed merely to reflect a change in to s been notified in writing of this change	tutes relative to ligation of my po he registered off	the proper and complete position as registered agent	t. Or. if this		
		06/29/2020				
Mg	nature of Registered Agent		Date	<u>-</u>		
If signing on be	half of an entity:					
N/A	yped or Printed Name					

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