

P19000009770

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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TALLAHASSEE, FL

C. GOLDEN

FEB 20 2019

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Brothers Pick Up Corp.
Name of Corporation

DOCUMENT NUMBER: P19000009750

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:

Daniel Vergara
Name of Contact Person

Brothers Pick Up Corp.
Firm/Company

5301 SW 57th Ct.
Address

Davie FL 33314
City/State and Zip Code

danielvergara07@hotmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Daniel Vergara at (954) 274-4218
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: Brothers Pick Up Corp
2. The principal office address: 6101 Cleveland St Lot A7
Hollywood FL 33024
3. The mailing address (if different): 5301 SW 57TH CT,
Davie FL 33314
4. Date of incorporation/qualification: January 28, 2019 Document number: P19000009770
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)
Gloria Y. Munoz
6101 Cleveland St Lot A7
Hollywood FL 33024

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

Daniel Vergara
5301 SW 57TH CT
Davie FL 33314

P.O. Box NOT acceptable

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.

Gloria Y. Munoz
Signature of an officer or director

Gloria Y. Munoz, Incorporator
Printed or typed name and title

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

02/12/2019
Date

If signing on behalf of an entity:

Typed or Printed Name

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

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STATE OF FLORIDA
TALLAHASSEE, FL