P190000 14763

(Requestor's Name)
(Address)
(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:

Office Use Only



300325777663

03/06/19--01007--024 ••35.60

2019 E338 -8 PM 3: 47

RARCIONS

MAR (8 2019

I ALBRITTON

COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Gold TRANSport Service Name of Corporation
DOCUMENT NUMBER: <u>P19000014763</u>
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:
ALberto Infante Name of Contact Person
Gold TRANSport Service
11615 SW 140 Ter Address
MIAMI FL 33176 City/State and Zip Code
90/dTSINC@gmail.com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
ALBATO INFANTE at (786) 419 1586 Name of Contact Person Area Code & Daytime Telephone Number
Manic of Contact Person Mea Code & Dayune 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: Gold TRANSport Service
2. The principal office address: 11615 Sw 140 Ter Miami FL 33176
3. The mailing address (if different): PO BOX 440475 MIAMIFL 33144
4. Date of incorporation/qualification: 02/13/2019 Document number: P19000014763
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)
Odalys Sosa
9958 SW 26 ST MiAMI FL 33165
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed): ### ### ### ### #### ###############
Isiranda Gonzalez Guerrero II615 SW 140 Ter Miami FL 33176 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.
Signature or an ordicer or director ALBS TO INFANTE 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. 3/5/2019
Signature of Registered Agent Date
If signing on behalf of an entity: TSIRANDA GONZALEZ Typed or Printed Name

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