

P19000018505

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

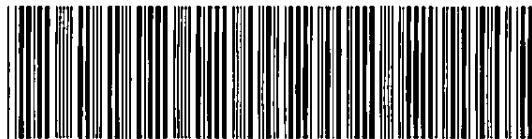
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TO: Amendment Section
Division of Corporations

SUBJECT: DINNER HERSOL FOODS CORPORATION
Name of Corporation

DOCUMENT NUMBER: P19000018505

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:

Name of Contact Person
HERNANDO J. CASTELLON
Firm/Company
DINNER HERSOL FOODS CORPORATION
Address
7777 NORTH WICKHAM ROAD SUITE 22
City/State and Zip Code
dinnerhersol@gmail.com

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

For further information concerning this matter, please call:

HERNANDO J. CASTELLON at (321) 890-7944
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
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

**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: DINNER HERSOL FODDS CORPORATION
2. The principal office address: 7777 NORTH WICKHAM ROAD SUITE 22
MELBOURNE, FLORIDA 32940
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 02/26/2019 Document number: p19000018505
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)
MICHAEL KAHN P.A.
482 NORTH HARBOR CITY BLVD
MELBOURNE, FLORIDA 32935
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
HERNANDO J. CASTELLON
7777 NORTH WICKHAM ROAD SUITE 22
P.O. Box NOT acceptable
MELBOURNE, FLORIDA 32940

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.

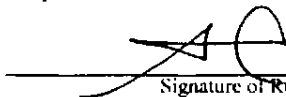


Signature of an officer or director

SOL M CASTELLON

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 of Registered Agent

07/29/2023

Date

If signing on behalf of an entity:

HERNANDO J. CASTELLON

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
CR2E045 (04/13)

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