

PI9000 035 674

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

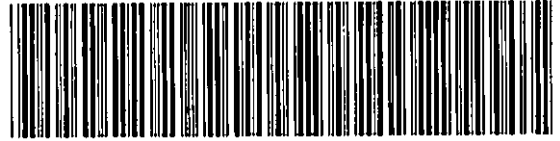
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2020 FEB 14 14:58

R. WHITE
FEB 18 2023

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: M G L B TRUCKING INC
Name of Corporation

DOCUMENT NUMBER: P19000035674

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:

RAUL LESTER VALDIVIA

Name of Contact Person

M G L B TRUCKING INC

Firm/Company

2116 DORRIS DR

Address

ORLANDO FL 32807

City/State and Zip Code

ygaland28@gmail.com

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

For further information concerning this matter, please call:

RAUL LESTER VALDIVIA

Name of Contact Person

at (

407

) 883-6051

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 11, 2020

RAUL LESTER VALDIVIA
2116 DORRIS DR.
ORLANDO, FL 32807

SUBJECT: M G L B TRUCKING INC
Ref. Number: P19000035674

We have received your document for M G L B TRUCKING INC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 6 cannot be left blank. Please complete section 6 with the new registered agent's information.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Rebekah White
Regulatory Specialist II Supervisor

Letter Number: 220A00000814

2020 FEB 14 PM 12:49

www.sunbiz.org

Division of Corporations - P.O. BOX 6327 -Tallahassee, Florida 32314

COVER LETTER

COPY

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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 ORANGE FL in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: M G L B TRUCKING INC
2. The principal office address: 2116 DORRIS DR, ORLANDO FL 32807
3. The mailing address (if different): _____
4. Date of incorporation/qualification: APRIL 22 2019 Document number: P19000035674
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)

RAUL LESTER VALDIVIA

2116 DORRIS DR

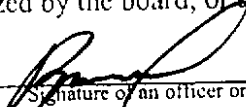
ORLANDO FL 32807

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

RA Raul Lester Valdivia
2116 Dorris Dr
Orlando FL 32807
P.O. Box NOT acceptable

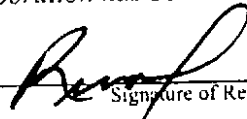
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

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 of an officer or director

RAUL LESTER VALDIVIA
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

11/21/2019

Date

If signing on behalf of an entity:

RAUL LESTER VALDIVIA

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