P19000048776

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Amendment Section

TO:

Division of Corporations	
SUBJECT: PASQUALE J VILARDO PA Name of Corporation	
Name of Corporation	
DOCUMENT NUMBER: P19000048776	
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:
AMANDA L. DECKER	
Name of Contact Person	
FLORIDA ENTREPRENEUR LAW, P.A.	
Firm/Company	
101 NE 3RD AVE, SUITE 1500	
Address	
FORT LAUDERDALE, FL 33301	
City/State and Zip Code	
PJ@MILLENNIUMMORTG.	AGE.IO
E-mail address: (to be used for future annual	report notification)
·	•
	olease call:
For further information concerning this matter, p	
•	at (954) 993-6186 Area Code & Daytime Telephone Numb

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

Amendment Section
Division of Corporations
The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Street Address:

CR2E045 (04/13)

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.0 statement of change is submitted for a corporation org	l
in order to change its registered office or reg	
1. The name of the corporation: PASQUALE J VILAR	DO PA
2. The principal office address: 12801 SW 9TH PLACE	E, DAVIE, FLORIDA 33325
2. The mailing address (if different).	
3. The mailing address (if different):	P19000048776
4. Date of incorporation/qualification: 06/06/2019	
The name and street address of the current registered Florida Department of State: (If resigned, enter resigned)	
PASQUALE J VILARDO	
12801 SW 9TH PLACE	
DAVIE, FLORIDA 33325	
6. The name and street address of the new registered a (if changed):	gent (if changed) and /or registered office
FLORIDA ENTREPRENEUR LAW, P	
101 NE 3RD AVE., SUITE 1500	
P.O.	Box NOT acceptable
FORT LAUDERDALE, FLORIDA 33	301
The street address of its registered office and the stre as changed will be identical.	eet address of the business office of its registered agent.
Such change was authorized by resolution duly adop authorized by the board, or the corporation has been	ted by its board of directors or by an officer so notified in writing of the change.
M 9 14 Anguale 2 Vilardo (Feb 9, 2021 15 45 EST)	Pasquale J Vilardo, MGR
Signature of an officer or director	Printed or typed name and title
l hereby accept the appointment as registered agent i I further agree to comply with the provisions of all st of my duties, and I am familiar with and accept the o document is being filed merely to reflect a change in corporation has been notified in writing of this chang	and agree to act in this capacity. tatutes relative to the proper and complete performanc ibligation of my position as registered agent. Or, if this the registered office address, I hereby confirm that the ge.
Amanda L. Decker	02/09/2021
Signature of Registered Agent	Date
If signing on behalf of an entity:	
AMANDA L. DECKER	
Typed or Printed Name	
* * * FILING 1	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)