## P19000053586

(Re	questor's Name)			
(Ad	ldress)			
(Ad	dress)			
(Cit	ty/State/Zip/Phone			
PICK-UP	☐ WAIT	MAIL		
(Bu	isiness Entity Nam	nei		
(20		,		
	cument Number)			
(00	coment number)			
	<b>.</b>			
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
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2021 FEB 12 AM 8: 59
SECRETARY OF STATE
TALLAHASSFF, FI

## **COVER LETTER**

TO:	Amendment Section Division of Corporations			
SUBJI Name	ECT: International MDT Commercial Corporation			
DOCU	JMENT NUMBER: P19000053586			
The en	closed Statement of Change of Registered	d Office/Agent and fee are submitted for filing.		
Please	return all correspondence concerning this	s matter to the following:		
Jaime J	Chavez			
Name	of Contact Person	<del></del>		
	tional MD Commecial Corporation			
	Company	1		
	morand Blvd s-103			
Addres				
	o FL 32807			
City/Si	tate and Zip Code			
	j.souffront@mdtoday.com.mz			
E-mai	address: (to be used for future annua	report notification)		
For fur	ther information concerning this matter, p	blease call:		
		7-0-0-0 cum.		
Jaime J	Chavez	at ( (52) ) 786-554-9488  Area Code & Daytime Telephone Number		
	Name of Contact Person	Area Code & Daytime Telephone Number		
Enclos	ed is a \$35.00 check made payable to the	Department of State.		
	Mailing Address: Amendment Section	Street Address:		
	Amendment Section Division of Corporations	Amendment Section		
	P.O. Box 6327	•		
	Tallahassee, FL 32314			

Tallahassee, FL 32303

CR2E045 (04/13)

FOR CORPO	TOF CHANGE OF REGIS PRATIONS	SIERED OFF	TICE OR REGISTERED	AGENT OR BOTH
Pursuant to the	provisions of sections 607.050	02, 617.0502, 6	07.1508, or 617.1508, Flo	rida Statutes, this
statement of cha	inge is submitted for a corpor	ation organizea	l under the laws of the Stat	e of Florida
	er to change its registered offic	•		e of Florida.
1. The name of	the corporation: International !	MDT Commerci	al Corp	
2. The principal	office address: 80S Semorarn	Blvd suite 103,	Orlando Fl 32807	· · · · · · · · · · · · · · · · · · ·
3. The mailing a	address (if different): 328 Mag	uire Road,Ocoe	e,FL 34761	
4. Date of incor	poration/qualification: $\frac{06/26/2}{1}$	019	Document number: P19	000053586
5. The name and	I street address of the current interest of State: (If resigned, ex	registered agent		
	Joaquin A Ruales, 80 S Semor	ma Blvd suite 10	3 Orlando Fl 32807	
				s 2
		<del></del>	<del></del>	SECHETAINS CONTINUES OF SEC
6. The name and (if changed):	I street address of the new reg	istered agent (if	f changed) and /or registere	
	Jaime J Chavez ,			S S S S S S S S S S S S S S S S S S S
	new addres :International MD7			L347 H 9
		P.O. Box NO	T acceptable	
The street addre	ess of its registered office and be identical.	I the street add	ress of the business office	of its registered agent.
Such change wa authorized by th	as authorized by resolution due board, or the corporation h	aly adopted by as been notifie	its board of directors or b d in writing of the change	y an officer so
g	Im.	Jo	se Carlo Souffrott	
~	re of an officer or director		Printed or typed name	
I hereby accept I further agree to of my duties, an document is hei corporation has	the appointment as registered comply with the provisions of I am familiar with and according filed merely to reflect a character point of the proving of the province o	a agent and age of all statutes ept the obligation ange in the regard change.	ree to act in this capacity relative to the proper and roll of my position as regisgistered office address, I )	complete performance tered agent. Or, if this tereby confirm that the
	#	<u>1/</u>	25/2021	
,	half of an antity		Date	
	half of an entity:			
Jaime J Chavez				
Tj	ped or Printed Name			

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