## P19 ECCC 91515

(Requestor's Name)				
(Address)				
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(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
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Special Instructions to Filing Officer:				
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02/18/20--01010--024 \*\*35.00

SECRETARY OF STATE

QM 3/6/20

## **COVER LETTER**

TO:	Amendment Section Division of Corporations	
SUB. Name	JECT: DFZ CARGO INC. e of Corporation	
DOC	CUMENT NUMBER: P19000091518	
The e	enclosed Statement of Change of Registered Office	ce/Agent and fee are submitted for filing.
Pleas	se return all correspondence concerning this matte	er to the following:
DAN	IIEL FERNANDEZ	
Name	e of Contact Person	
DFZ	CARGO INC.	
Firm	/Company	<del></del>
1311	7 SW 18TH TER	
Addr	ress	
MIA	MI, FL 33175	
City/	State and Zip Code	
	chichoed@gmail.com	
E-ma	ail address: (to be used for future annual repo	ort notification)
For f	further information concerning this matter, please	cali:
DAN	HEL FERNANDEZ	at (786 )718-9615
	Name of Contact Person	at (786 )718-9615 Area Code & Daytime Telephone Number
Encl	osed is a \$35.00 check made payable to the Depa	rtment of State.
	Mailing Address: Amendment Section	Street Address: Amendment Section
	Division of Corporations	Division of Corporations
	P.O. Box 6327	Clifton Building
	Tallahassee, FL 32314	2661 Executive Center Circle

Tallahassee, FL 32301

CR2E045 (04/13)

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

Pursuant to the provisions of sections 607.0502, 617.0502, 60 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 of	agent, or both, in the State of Florida.			
1. The name of the corporation: DFZ CARGO INC.				
2. The principal office address: 14901 SW 82ND TER APT 103	8, MIAMI, FL 33193			
3. The mailing address (if different):				
4. Date of incorporation/qualification: Document number: P19000091518				
5. The name and street address of the current registered agent Florida Department of State: (If resigned, enter resigned)	and registered office on file with the			
FERNANDEZ, DANIEL				
14901 SW 82ND TER APT 103	<b>2020</b>			
MIAMI, FL 33193	changed) and /or registered office			
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):				
FERNANDEZ, DANIEL				
13117 SW 18TH TER				
P.O. Box NOT acceptable				
MIAMI, FL 33175				
The street address of its registered office and the street address changed will be identical.	ess of the business office of its registered agent,			
Such change was authorized by resolution duly adopted by is authorized by the board, or the corporation has been notified	ts board of directors or by an officer so I in writing of the change.			
The DA	ANIEL FERNANDEZ, PRESIDENT			
Signature of an officer or director	Printed or typed name and title			
I hereby accept the appointment as registered agent and age I further agree to comply with the provisions of all statutes to of my duties, and I am familiar with and accept the obligation document is being filed merely to reflect a change in the reg corporation has been notified in writing of this change.	ree to act in this capacity. relative to the proper and complete performance on of my position as registered agent. Or, if this sistered office address, I hereby confirm that the			
Signature of Registered Agent	Date			
If signing on behalf of an entity:				
Typed or Printed Name				

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