

P20 0000 10203

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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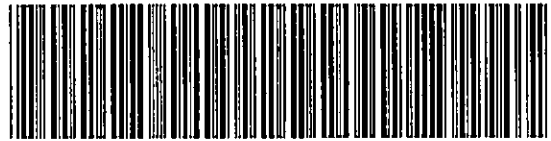
(Business Entity Name)

(Document Number)

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: FV & G SERVICES, INC.

Name of Corporation

DOCUMENT NUMBER: P20000010203

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:

FABIO VINICIOS DE OLIVEIRA GERALDO

Name of Contact Person

FV & G SERVICES, INC.

Firm/Company

4305 VINELAND RD. STE G10

Address

ORLANDO, FL 32811

City/State and Zip Code

FVGSERVICESFL@GMAIL.COM

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

For further information concerning this matter, please call:

FABIO VINICIOS DE OLIVEIRA GERALDO

Name of Contact Person

at (407) 728-2513

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

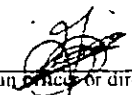
**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH
FOR CORPORATIONS**

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


1. The name of the corporation: FV & G SERVICES, INC.
2. The principal office address: 4305 VINELAND RD. STE G10
ORLANDO, FLORIDA 32811
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 1/28/20 Document number: P20000010203
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)
FABIO VINICIOS DE OLIVEIRA GERALDO
825 WEST 40TH STREET APT 3
MIAMI BEACH, FL 33140
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
FABIO VINICIOS DE OLIVEIRA GERALDO
4305 VINELAND RD. STE G10
ORLANDO, FLORIDA 32811
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	<u>FABIO VINICIOS DE OLIVEIRA /P.RESIDENT</u> _____ Printed or typed name and title
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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	<u>6-11-20</u> _____ Date
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If signing on behalf of an entity:

FABIO GERALDO

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)