

P21 0000006650

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

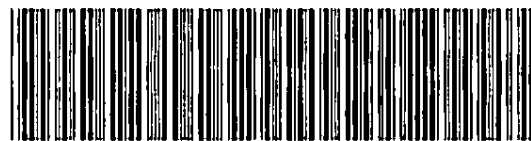
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



100360784901

03/01/21--01012--026 **35.00

2021 MAR -1 PM 3:42



11/20/21 R



2804 Gateway Oaks Drive #100 Sacramento, CA 95833

Phone (800)533-7272 Fax (800)603-5868

REFERENCE # MUST BE ON INVOICE TO BE PAID

	NUMBER PAGES
Date: February 22, 2021	AE: Cori Ann Crosthwaite
TO: Florida Department of State 108090	REFERENCE: 1538895
New Filing Section - Division of Corporations	
PO Box 6327	
Tallahassee, FL 32314	

FAX:

PLEASE PERFORM THE FOLLOWING:

ALONSO FINANCIAL GROUP INC.

Change of Registered Agent

IN: FL

SPECIAL INSTRUCTIONS:

<u>Service Description</u>	<u>Check Number</u>	<u>Name</u>	<u>Amount</u>
Change of Registered Agent	776179	Florida Department of State	\$35

PLEASE RETURN: Regular Mail

PLEASE CALL (800)533-7272 ATTN: Vanessa Calhoun TO CONFIRM FILING RESULTS

RETURN TO: PARASEC - 2804 GATEWAY OAKS DRIVE #100 SACRAMENTO, CA 95833

CALL IMMEDIATELY IF YOU HAVE ANY QUESTIONS OR THE DEADLINE WILL NOT BE MET
(800)533-7272

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

1. The name of the corporation: Alonso Financial Group Inc.
2. The principal office address: 208 Shady Hollow, Casselberry, Florida 32707
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 01/13/2021 Document number: P21000006650
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)

Manuel Alonso

208 SHADY HOLLOW #100

CASSELBERRY, FL 32707

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

Manuel Alonso

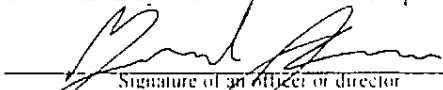
208 Shady Hollow

P.O. Box NOT acceptable

CASSELBERRY, FL 32707

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

Manuel Alonso CEO
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

2-21-2021
Date

If signing on behalf of an entity:

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)