

P21000035249

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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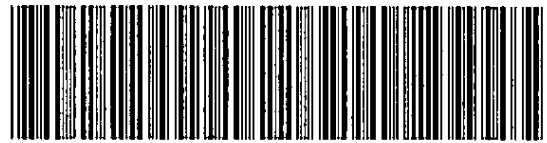
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

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TALLAHASSEE, FLORIDA

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** ZOOAC TRUCKING INC  
Name of Corporation

**DOCUMENT NUMBER:** P21000035249

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:

OMAR CABALLOS MARRERO

Name of Contact Person

ZOOAC TRUCKING INC

Firm/Company

1246 SAGO PALMS BLVD

Address

KISSIMMEE, FL 34741

City/State and Zip Code

HERNAN.TPS@GMAIL.COM

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

For further information concerning this matter, please call:

OMAR CEBALLOS MARRERO

Name of Contact Person

at (321) 295-6582

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

1. The name of the corporation: ZOOAC TRUCKING INC
2. The principal office address: 1246 SAGO PALMS BLVD KISSIMMEE, FL 34741
3. The mailing address (if different): N/A
4. Date of incorporation/qualification: 04/12/2021 Document number: P21000035249
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)

CEBALLOS MARRERO, OMAR

1804 DESTINY BLVD APT 208

KISSIMMEE, FL. 34741

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

(SAME) CEBALLOS MARRERO, OMAR

(ADDRESS CHANGE) 1246 SAGO PALMS BLVD

P.O. Box NOT acceptable

KISSIMMEE, FL 34741

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.

*X Omar Leballos*  
Signature of an officer or director

OMAR CEBALLOS MARRERO (PRES)

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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.*

Omar Pablos  
Signature of Registered Agent

06/07/2022

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))

FILED  
2022 JUN 17 PM 4:35  
JUL 1 2022  
TALLAHASSEE FL 32301  
U.S. DISTRICT COURT  
SOUTHERD DISTRICT OF FLORIDA  
U.S. District Court  
Southern District of Florida  
Tallahassee, Florida 32301  
U.S. District Court  
Southern District of Florida  
Tallahassee, Florida 32301