## P122 CICC 15606

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## **COVER LETTER**

TO:	Amendment Section Division of Corporations
SUBJE Name o	CCT: IB REMODELING & DESIGN, CORP of Corporation
DOCU	MENT NUMBER: P22000015606
The en	closed Statement of Change of Registered Office/Agent and fee are submitted for filing.
Please	return all correspondence concerning this matter to the following:
Name of IB REM	MANUEL BANGUELA  of Contact Person  MODELING & DESIGN, CORP  Tompany
	ompany SW 136 CT
Addres	S
MIAMI	, FL 33177
City/St	ate and Zip Code
	banguclaivan@gmail.com
E-mail	address: (to be used for future annual report notification)
For fur	ther information concerning this matter, please call:
IVAN N	M BANGUELA at (786 ) 2822376  Name of Contact Person Area Code & Daytime Telephone Nu
	Name of Contact Person Area Code & Daytime Telephone Nu

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

CR2E045 (04/13)

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

	nge is submitte	ed for a corpora	tion organized	under the laws	of the State	of FLOR	RIDA	<i>S</i>
	-	registered office	_	_	in the State	of Florid	la.	
1. The name of t	he corporation	IB REMODEL	er Corne		-			
2. The principal MIAMI, FL 3317		18980 SW 136 C						
3. The mailing a	ddress (if diffe	erent):						
4. Date of incorp	oration/qualif	ication: <u>02/23/20</u>	)22	_ Document nur	nber: <u>P220</u> 6	)0015606	<u> </u>	
		s of the current re : (If resigned, en		and registered of	office on file	e with th	e	
	RESIGNED	ACCOUNTING	SOLUTIONS	OF USA, INC				
	10300 SUNSE	ET DR #265				<u>س</u> :	202	
	MIAMI, FL 3	3173				ALLK GREF	2022 MAR 14	
6. The name and (if changed):	a most degree of the new registered agent (it standards) and to registered agent							M
	IVAN MANU	IEL BANGUELA				- R-3	AM 9:	O
	18980 SW 130	6 CT				THE ATT	2	
	P.O. Box NOT acceptable							
	MIAMI, FL 3			<u>.                                      </u>				
The street address changed will	ess of its regis be identical.	tered office and	the street add	ess of the busin	ess office	of its reg	gisterec	d agent,
		oy resolution du e corporation ha						
Ivan L	1 Baxis	la .	17	'AN MANUEL I	BANGUELA	١		
Signatu	re of an officer or o	lirector		Printed o	or typed name a	ind title	<del></del>	
I hereby accept I further agree to of my duties, an document is bei corporation has	the appointments comply with d I am familiang filed merel been notified	ent as registered in the provisions or with and acce in to reflect a ch in writing of the or	d agent and ag of all statutes of the obligati ange in the reg is change.	ree to act in thi relative to the p on of mv positic gistered office a	s capacity. proper and on as regist address, I h	complet tered ago ereby co	e perfa ent. O Infirm	ormance r, if this that the
Tuan M	Borns	la .	3/	3/2022				
Sig	nature of Registere	d Agent			Date			
If signing on be	half of an enti	ity:						
IVAN MANUEI	. BANGIELA							
T	yped or Printed Na	me	<del></del>					

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

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

CR2E045 (04/13)