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12/21/23--01913--002 **35.00

COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: BERTOLOS GREAT SOLUTIONS CORP	
Name of Corporation	
DOCUMENT NUMBER: P23000021403	
The enclosed Statement of Change of Registered Office/Agent ar	nd fee are submitted for filing.
Please return all correspondence concerning this matter to the fol	lowing:
NELSON PAGAN	
Name of Contact Person	-
Firm/Company PHOENIX FINANCIAL TAX SERVICES LLC	-
Address 8131 VINELAND AVE 214 ORLANDO, FL 32821	-
City/State and Zip Code JOSE@PHOENIXFINANCIALTAX.COM	_
E-mail address: (to be used for future annual report notifica	tion)
For further information concerning this matter, please call:	
NELSON PAGAN Name of Contact Person at (Arc	5308300 ea Code & Davtime Telephone Number
Name of Contact reison Arc	a code de Daytimo 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

CR2E045 (04/13)

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

statement of cha	inge is submitted for a corporat	?, 617.0502, 607.1508, or 617.1508, Florida Stat ion organized under the laws of the State of <mark>FLC</mark> or registered agent, or both, in the State of Flor	DRIDA
	the corporation:	REAT SOLUTIONS CORP L TRAIL KISSIMMEE, FL 34747	
3. The mailing a	address (if different):		
4. Date of incor	poration/qualification:	Document number: P23(NXX)214	
	d street address of the current re rtment of State: (If resigned, ent CAROLINE DOS SANTOS	gistered agent and registered office on file with the resigned)	he
	3337 TRANQUIL TRAIL KISSI	IMMEE, FL 34747	
6. The name an (if changed):	d street address of the new regis	stered agent (if changed) and /or registered office	12 1 12 12 12 12 12 12 12 12 12 12 12 12
	PHOENIX FINANCIAL TAX 8		그 및
	8131 VINELAND AVE 214 OR	P.O. Box NOT acceptable	
The street addr	ess of its registered office and be identical.	the street address of the business office of its re	gistered agent.
Such change wauthorized by t	as authorized by resolution dul hyboard, or the corporation ha	y adopted by its board of directors or by an off is been notified in writing of the change.	īcer so
	grol	CAROLINE DOS SANTOS	
Signati	ire of an officer or director	Printed or typed name and title	
I further agree of my duties, a document is bé	the appointment as registered to comply with the provisions of all am familiar with and acceling filed merely to reflect a chast been notified in writing of this	l agent and agree to act in this capacity. of all statutes relative to the proper and comple pt the obligation of my position as registered a ange in the registered office address. I hereby c is change.	ete performance gent. Or, if this Confirm that the
10,1	0	10/31/2023	
V Si	gnature of Registered Agent	Date	
If signing on b	ehalf of an entity:		
Charleni	Sub SANTOS Speed or Printed Name		

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