

P 23000060912

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

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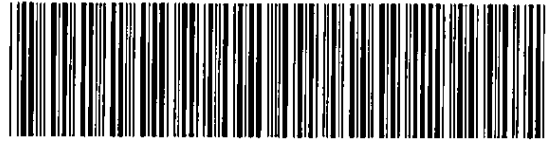
(Business Entity Name)

(Document Number)

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## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Ocean Fleet Services, Inc.  
Name of Corporation

**DOCUMENT NUMBER:** P23000060912

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:

Luis A Gayoso

Name of Contact Person

Ocean Fleet Services, Inc

Firm/Company

9011 SW 19th St

Address

Miami FL 33165

City/State and Zip Code

point435@yahoo.com

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

For further information concerning this matter, please call:

Luis A Gayoso

Name of Contact Person

at (305) 7251081

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: Ocean Fleet Services, Inc.
2. The principal office address: 9011 SW 19th St, Miami FL 33165
3. The mailing address (if different): \_\_\_\_\_
4. Date of incorporation/qualification: \_\_\_\_\_ Document number: P23000060912
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)

Luis A. Gayoso

9011 SW 19th St, Miami FL 33165

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

Carlos E. Huratdo

9011 SW 19th St

P.O. Box NOT acceptable

Miami FL 33165

The street address of its registered office and the street address of the business office of its registered agent as changed will be identical.

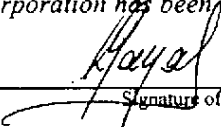
Such change was authorized by resolution duly adopted by its board of directors or by an officer authorized by the board, or the corporation has been notified in writing of the change.

  
Signature of an officer or director

Luis A Gayoso

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

11/08/2023

Date

If signing on behalf of an entity:

Luis A. Gayoso

Typed or Printed Name

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE

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STATE OF FLORIDA