

P93000056450

Florida Department of State
Division of Corporations
Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H09000226383 3)))



H09000226383ABCO

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850) 617-6380

From:

Account Name : RICARDO BAJANDAS, P.A.
Account Number : 110263002111
Phone : (305) 377-0809
Fax Number : (305) 377-0781

09 OCT 22 AM 9:39
FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

REGISTERED AGENT CHANGE

ABCO PREMIUM FINANCE, INC.

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$35.00

RECEIVED

2009 OCT 22 AM 8:00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Electronic Filing Menu

Corporate Filing Menu

Help

<https://efile.sunbiz.org/scripts/efilcovr.exe>

10/22/2009

PA Change

10-23-09

Fax Audit Number (H09000226383 3)

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: ABCO PREMIUM FINANCE, INC.
Name of Corporation

DOCUMENT NUMBER: P93000056450

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:

ANDREW BEYDA
Name of Contact Person

VILLANUEVA, BAJANDAS, & FITZGERALD, LLP
Firm/Company

1000 BRICKELL AVE., STE 200
Address

MIAMI, FLORIDA 33131
City/State and Zip Code

ABEYDA@VB-LAWYERS.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

ANDREW BEYDA at (305) 377-0086
Name of Contact Person 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
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

CR2E045 (8/05)

Fax Audit Number : (H09000226383 3)

**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: ABCO PREMIUM FINANCE, INC.
2. The principal office address: 350 SEVILLA AVE., CORAL GABLES, FLORIDA 33134
3. The mailing address (if different): _____

4. Date of incorporation/qualification: 08/11/1993 Document number: P93000056450

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)

VILLANUEVA, BAJANDAS, & FITZGERALD LLP (resigned)
1000 BRICKELL AVE., STE 200 (resigned)
MIAMI, FLORIDA 33131

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

HECTOR D. FORTUN
365 PALERMO AVE.
P.O. Box NOT acceptable
CORAL GABLES, FLORIDA 33134

FILED
09 OCT 22 AM 9:39
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

HECTOR D. FORTUN - DIRECTOR
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

10/22/09
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 (3/05)