## P94 00000 2300

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## **COVER LETTER**

Amendment Section TO: Division of Corporations ORTEGA GRAPHIC ENTERPRISES INC Name of Corporation P94000002300 DOCUMENT NUMBER 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: JEANETTE RODRIGUEZ Name of Contact Person ORTEGA GRAPHIC ENTERPISES INC Firm/Company 7930 WEST 26TH AVE #7 Address HIALEA FL 33016 City/State and Zip Code UGRAPHICS1@AOL.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: CARLOS ORTEGA Name of Contact Person Enclosed is a \$35.00 check made payable to the Department of State. Street Address: Mailing Address:

Amendment Section

P.O. Box 6327

Division of Corporations

Tallahassee, FL 32314

Amendment Section

Clifton Building

Division of Corporations

Tallahassee, FL 32301

2661 Executive Center Circle

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

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this inge is submitted for a corporation organized under the laws of the State of FLORIDA ir to change its registered office or registered agent, or both, in the State of Florida.
1. The name of t	the comparation: ORTEGA GRAPHIC ENTERPRISES INC
2. The principal	office address: 7930 WEST 26TH AVE #7
3. The mailing a	address (if different):
4. Date of incorp	poration/qualification: JANUARY 1994 Document number: P9400002300
5. The name and	d street address of the current registered agent and registered office on file with the rtment of State: (If resigned, enter resigned)
•	CARLOS ORTEGA
	210 HUMPTY DRIVE
	KEY LARGO FL 33037
6. The name and (if changed):	d street address of the new registered agent (if changed) and /or registered office
	JEANETTE RODRIGUEZ
	8832 NW 142 LANE
	P.O. Box NOT acceptable  MIAMI LAKES 33018
The street address changed will	ess of its registered office and the street address of the business office of its registered agent,
Such change was	as authorized by resolution duly adopted by its board of directors or by an officer so he board or the corporation has been notified in writing of the change.
- 0	Printed or typed name and title
I hereby accept I further agree performance of agent. Or, if th hereby confirm	t the appointment as registered agent and agree to act in this capacity.  to comply with the provisions of all statutes relative to the proper and complete  f my duties, and I am familiar with and accept the obligation of my position as registered  sis document is being filed merely to reflect a change in the registered office address, I  show the corporation has been notified in writing of this change.
	7/08/19
	gnature of Registered Agent Date
Jeanette	chalf of an entity:  Constitution of the control of

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

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