

P94000049937

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

(Document Number)

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Carl Noriega 4/3/17
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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APR 03 2017

ALBRITTON

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Great American Capital Corp.
Name of Corporation

DOCUMENT NUMBER: P94000049937

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:

Carl Noriega
Name of Contact Person
Great American Capital Corp.
Firm/Company
2690 Weston Road, Suite 200
Address
Weston, Florida 33331
City/State and Zip Code
Carl@great-american.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Carl Noriega at (954) 400-5641
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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 29, 2017

CARL NORIEGA
GREAT AMERICAN CAPITAL CORP
2690 WESTON RD., STE. 200
WESTON, FL 33331

SUBJECT: GREAT AMERICAN CAPITAL CORP.
Ref. Number: P94000049937

We have received your document for GREAT AMERICAN CAPITAL CORP. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document is illegible and not acceptable for imaging.

Please type/print information clearly.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Irene Albritton
Regulatory Specialist II

Letter Number: 717A00006022

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: Great American Capital Corp.
2. The principal office address: 2690 Weston Road Suite 200
Weston, Florida 33331
3. The mailing address (if different): N/A

4. Date of incorporation/qualification: 7/6/1994 Document number: P94000049937

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)

Carl Noriega
2690 Weston Road, Suite 200
Weston, Florida 33331

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

Claudio Noriega
2690 Weston Road, Suite 200
Weston, Florida 33331
P.O. Box NOT acceptable

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.

Carl J.
Signature of an officer or director

Carl Noriega President
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.

Claudio Noriega
Signature of Registered Agent

March 21, 2017
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 (03/12)

FILED
2017 APR -3 PM 1:28
TALLAHASSEE, FLORIDA
SECRETARY OF STATE