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SECRETARY OF STATE

TALLAHASSEE FISHATA

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COVER LETTER

TO: Amendment Section Division of Corporations		
SUBJECT: Miami Air, Ice + Plumbing Inc. Name of Corporation		
DOCUMENT NUMBER: 195 00 00 49 733		
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:		
Calessa Am Lanier Esq. Name of Contact Person		
Phillips Lance Firm/Company		
One Playler Bld, 14NE 1.+ Ave Incl Hoor Address		
Misoni, 61 33/32, City/State and Zip Code		
E-mail address: (to be used for future annual report notification)		
For further information concerning this matter, please call:		
Carexa Lanier at (305) 350-5399 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

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 in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: Miami Air, Ice & Plumbing Inc
2. The principal office address: 10752 SW 186 St
Cutter Bay, F1 33157
3. The mailing address (if different):
4. Date of incorporation/qualification: 6/26/1995 Document number: P950000 49733
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) Pavid H. Pollack
David H. Pollack
David H. Pollack S40 Brikell Key Pr. No C-1 SSEE 5
Miani, 81 33131
6. The name and street address of the new registered agent (if changed) and /or registered of the (if changed):
Caressa Ann Lanier, Esq
One Player Blog, 14 NE 1st Ave 200 Floor P.O. Box NOT acceptable
miani, 81 33132
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 Signature of an officer or director Printeg 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 Date
If signing on behalf of an entity:
Cares Laies Typed or Printed Name

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (8/05)

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