

P97000062050

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

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(Business Entity Name)

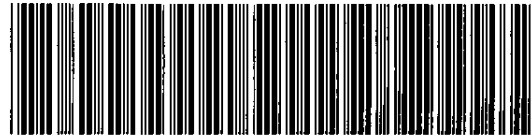
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OCT 04 2011

EXAMINER

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Galindo Associates Inc.
Name of Corporation

DOCUMENT NUMBER: 9970000 62050

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:

Martha Elena Galindo
Name of Contact Person

Galindo Associates Inc.
Firm/Company

3800 South Ocean Drive, Suite 1618
Address

Hollywood, Florida 33019
City/State and Zip Code

mgalindo@translationsandmore.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Martha E. Galindo at (954) 255 5620
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 Florida in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Galindo Associates Inc.
2. The principal office address: 3800 South Ocean Drive, Suite 1618, Hollywood Florida 33019
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 07/17/1997 Document number: P 970000 62050
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)

Martha E. Galindo

6844 West Sample Road

Coral Springs, Florida 33067

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

Martha E. Galindo

3800 South Ocean Drive Suite 1618

P.O. Box NOT acceptable

Hollywood Florida 33019

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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

Martha E. Galindo, 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.



Signature of Registered Agent

September 30, 2011

Date

If signing on behalf of an entity:

MARTHA E. GALINDO

Typed or Printed Name

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