Pagoooo29090

A.C. A. V. Services, Inc.

Requester's Name

P. O. Box 771408

Address

Migmi, Flu. 33177-0024

City/State/Zip Phone #

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1.								
	(C	orporation Name)		(Document #)				
2.					300	00450	71732 -01097003	
<i></i>	(Corporation Name)			(Document #)	****105.00 *****35.00			
3	(C	orporation Name)		(Document #)	·		_	
4	· · · · · · · · · · · · · · · · · · ·	orporation Name)		(Document #)			_	
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М	lail out	☐ Will wait		Photocopy	Cer	rtificate of Sta	tus	
NEW I	FILINGS		AN	MENDMENTS	-	-		
Profit Not for Profit Limited Liability Domestication Other				Amendment Resignation of R.A., Officer/Director Change of Registered Agent Dissolution/Withdrawal Merger				
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	inual Rep ctitious N			Foreign Limited Partners Reinstatement Trademark Other	ship	F STATE FLORIDA	M 00 55	

Examiner's Initials W 82

CR2E031(7/97)

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

the undersigned corporation organized under the laws of the State of FIORIDA
submits the following statement in order to change its registered office or registered agent, or both, in
the State of Florida.
1. The name of the corporation: A.C.A.N. Services, Inc.
2. The mailing address of the corporation: 11770 Sw 183 Street
Miami, FL 33177
3. Date of incorporation/qualification: MARch 30, 1999 Document number: 19900000000000000000000000000000000000
4. The name and address of the current registered agent and office:
Mancy Sanz
1770 SW 183 Street
Migray Fl 33177
5. The name and address of the new registered agent (if changed) and/or registered office (if changed): (P. O. Box Not Acceptable)
Nicolas G. Villagelin, C.P.A.
1841 S.W. 29 th Avenue
Miami, FL 33145
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.
(Signature of an officer, ghairman or vice chairman of the board) (Date)
(Printed or typed name and title)
Having been named as registered agent and to accept service of process for the above stated corporation, 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.
(Signature of Registered Agent)
If signing on behalf of an entity:
(Typed or Printed Name) (Capacity)
* * * FILING FEE: \$35.00 * * * 55 55 55 55 55 55 55 55 55 55 55
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CR2E045(9/00)

DIVISION OF CORPORATIONS

P.O. Box 6327

TALLAHASSEE, FL 32314