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Division of Corporations



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J. HORNE

JUN - 3 2022

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

statement of change is	sions of sections 607.0502, 617.050. s submitted for a corporation organ hange its registered office or registe	ized under the laws o)	f the State of CA	
1. The name of the co	101 00 11/41 1 4/11 0 A			
2. The principal office	A POSSION.			
2. The principal office	ORANGE, CA 92867	:		
3. The mailing addres	s (if different)	-	, .	
<del>-</del>	on/qualification: 11/15/2001	Document num	ber: F0100000597	0
5. The name and stree	et address of the current registered a t of State: (If resigned, enter resigne	gent and registered of		
RU <sup>-</sup>	ΓBERG, GERALD S	:		• .
377	MAITLAND AVENUE SUITE 1001			
AL	FAMONTE SPRINGS, FL 32701		<u> </u>	2022 SEC
6. The name and sire (if changed):	et address of the new registered age	nt (if changed) and /o	r registered office	2022 JUN -2 SECRETARY LLAHASSET
c 1	Corporation System	• •		Υ <sub>0</sub>
-120	0 South Pine Island Road			
	P.O. Bo	x NOT acceptable	,	No.
Plas	ntation, Florida 33324		,	
The street address of as changed will be in	f its registered office and the street dentical.	address of the busin	ess office of its re	gistered agent,
Such change was au authorized by the bo	thorized by resolution duly adopted and, or the corporation has been no	d by its board of dire	ctors or by an offi he change:	cer so
$\sim$ $\sim$		Allan Adler, Presid	ent	
	n officer or director		r lyped name and little	
I hereby accept the call further agree to coof my duties, and I a document is being fit corporation has bee	appointment as registered agent an imply with the provisions of all stat im familiar with and accept the obl led merely to reflect a change in th in notified in writing of this change	d agree to act in this utes relative to the p igation of my positio e registered office a	s capacity, roper and comple n as registered ag ddress, I hereby co	le performance ent. Or if this onfirm that the
C T Corporation Syst	em Cania Bell	6/1/20		
Signature	of Registered Agent	0/1/20	Date	<del></del>
If signing on behalf	of an emity:	`. :	•	
Denise Bell - A	Asst Secretary	;	,	
Typed	or Printed Name			
	* * * FILING FI	E: \$35.00.* * *	••	
MAIL T	MAKE CHECKS PAYABLE TO FLO TO: DIVISION OF CORPORATIONS, P	orida Department .O. Box 6327, Tall	of State ahassee, FL 323	14

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