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Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 Phone : (307)200-2803 Fax Number : (813)436-5206

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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REGISTERED AGENT CHANGE HOLLMAN, INC.

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

statement of cha	nge is submitted for a corporatio	N17.0502, 607.1508, or 617.1508, Florida Statutes, this n organized under the laws of the State of	
1. The name of t	he corporation: Hollman Inc		
3. The mailing a	ddress (if different):		
4. Date of incorp	poration/qualification: 05/01/19	Document number: F19000002187	
	street address of the current regi timent of State: (If resigned, enter	stered agent and registered office on file with the tesigned)	
	C T CORPORATION SYSTEM		
	1200 SOUTH PINE ISLAND ROA)	
	PLANTATION, FL 33324		
6. The name and (if changed):	street address of the new registe	red agent (if changed) and /or registered office	
	Registered Agents Inc		
	7901 4th St N STE 300		
	P.O. Box NOF acceptable		
	St. Petersburg FL 33702		
The street addre	ss of its registered office and the be identical.	street address of the business office of its registered agent.	
_		adopted by its board of directors or by an officer so been notified in writing of the change.	
Vravi	y Hollman	Travis Hollman Printed or typed name and title	
Signatu	e of an officer or director	Printed or typed name and title	
l further agrée l of my duties, an document is bei	a comply with the provisions at	gent and agree to act in this capacity, all statutes relative to the proper and complete performance the obligation of my position as registered agent. Or, if thi, ge in the registered office address, I hereby confirm that the hange.	
Dold Pers		8/4/2023	
Sign	nature of Registered Agent	Date	
If signing on be	half of an entity:		
David Roberts		_	
r	ped or Printed Name	_	

* * * FILING FEE: \$35,00 * * *