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To:

Division of Corporations

Fax Number : (850)617-6380

From:

ACCOUNT Name : CORPORATE CREATIONS INTERNATIONAL INC.

Account Number: 110432003053 Phone : (561)694-8107 Fax Number : (561)214-8442

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

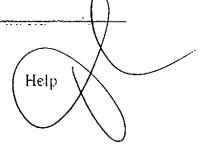
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REGISTERED AGENT CHANGE A & COMPANY, INC.

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

Pursuant to the statement of a	ne provisions of sections 607.0502, (hange is submitted for a corporatio	617.0502, 607.1508, or 617.1508, Florida Statutes, in organized under the laws of the State of <u>Californi</u>	this a	
		r registered agent, or both, in the State of Florida.		
1. The name of	of the corporation: A & Company, In	sc.		
	al office address: 220 WEST 20TH A			
		·		
3. The mailing	address (if different): 220 WEST 2	OTH AVENUE SAN MATEO, CA 94403		
4. Date of inco	orporation/qualification: 02/14/2023	Document number: F23000001332		
The name a Florida Dep	nd street address of the current regis artment of State: (If resigned, enter	stered agent and registered office on file with the resigned)	- •	
	C T CORPORATION SYSTEM		2023	
	1200 SOUTH PINE ISLAND ROAD			
	PLANTATION, FL 33324		2023 HAR 21	
6. The name a (if changed)	nd street address of the new register	red agent (if changed) and /or registered office	NH 10: 03	
	Corporate Creations Network Inc.		د	
	801 US Highway 1			
	North Falm Beach, FL 33408	P.O. Box NOT acceptable		
The street add	ress of its registered office and the	street address of the business office of its register	red agent,	
		dopted by its board of directors or by an officer seen notified in writing of the change.		
	gimberlyn Teefry are of the others or disector	Tymberlyn Teefey- Attorney-in-Fact		
		Printed or typed name and title		
hereby accep further agree of my duties, a locument is be corporation ha	t the appointment as registered ag. to comply with the provisions of a nd I am familiar with and accept th ing filed merely to reflect a chang s been notified in writing of this ch	ent and agree to act in this capacity. Ill statutes relative to the proper and complete per he obligation of my position as registered agent. e in the registered office address, I hereby confirm hange.	formance Or, if this n that the	
	Tyrnbarlyn Tecfey harve of Recistered Lobbi	3-15-2023		
Şi	thature of Registered Agent	Date		
f signing on b	chalf of an entity:			
l'ymberlyn Teef	ey, Special Secretary			
7	yped or Printed Name			
	* * * FILIN	G FEE: \$35.00 * * *		

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (04/13)