

(Red	questor's Name)	
(Add	dress)	
(Add	dress)	
(City	y/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL.
(Bus	siness Entity Nai	me)
(Doc	cument Number))
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Special Instructions to I	Filing Officer:	

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R. While

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

	-		607.1508, or 617.1508, ed under the laws of the	_	. .	
			d agent, or both, in the			
1. The name of th	ne corporation:	Rela Projecti	es Tax			
	office address: 44	OD N FEDER	CAT HWAY, STE	29		
		a Lator to	3343/			
3. The mailing add	dress (if different):					
4. Date of incorpo	pration/qualification:	07-03-20	13 Document number:	P1301	00051	ءَ 15°
5. The name and s		urrent registered age	nt and registered office o			
• · · · ·	NICOLE A	lusa Ars	SNED	to the control of the state of	ray as a major species.	
	· · · · · · · · · · · · · · · · · · ·					•
	·	<u>.</u>	·	 _		
6. The name and s (if changed):	street address of the n	ew registered agent (if changed) and /or regis	stered office		;, '
· —	Jacqueles	e Russo	· · · · · · · · · · · · · · · · · · ·			
• _	932 NW	P.O. Box NOT acc	entable	· 		
-	Buck RATIN					
The street address as changed will be		· ·	dress of the business of	fice of its regis	stered agent,	:
		•	its board of directors o			•
Dut	Mose		Deval	A		
I horehy govern the	ector		rinted or type	- Ile		
I further agree to performance of my	e appointment as re- comply with the pro y duties, and I am fa	gisterea agent and a visions of all statutes miliar with and acce	gree to act in this capa relative to the proper pt the obligation of my a-change in the registe riting of this change	ctry. and complete poșition as re	gistered	
hereby confirm the	at the corporation h	led merely to reflect as been notified in w	a change in the registe riting of this change.	red office add	ress; !	
Signati.	of Dee		11/11/15	<u> </u>	<u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>	
If signing or beha	ure of Redistered Agent If of an entity:		, Date		•	
Tarra	in the last	٠				
Турес	d or Printed Name					

Make checks payable to Florida Department of State
Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314
CR2E045 (03/12)

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