

PI3000 051 208

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

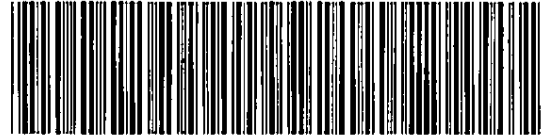
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

SEP 10 2019

T SCHROEDER

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: **Registered Agent Address Change**

Name of Corporation

DOCUMENT NUMBER: **P13000051208**

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Suzette Marteny Moore

Name of Contact Person

Vicious Litigator

Firm/Company

2690 S. Combee Rd

Address

Lakeland, FL 33803

City/State and Zip Code

s.moore@smoorelaw.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Suzette Moore

Name of Contact Person

at (**863**) **229-2140**

Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of FLORIDA in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: VICIOUS LITIGATOR, INC.
2. The principal office address: 2690 S. COMBEE ROAD, LAKE LAND FL 33803

3. The mailing address (if different): _____

4. Date of incorporation/qualification: 6/1/2013 Document number: P12000051208

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

S. MOORE LAW, PLLC

4720 CLEVELAND HEIGHTS BLVD. #201

LAKELAND FLORIDA 33813

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

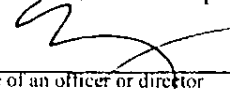
2690 S. COMBEE ROAD

P.O. Box NOT acceptable

LAKELAND FLORIDA 33803

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, or the corporation has been notified in writing of the change.




Signature of an officer or director

SUZETTE M. MOORE, President

Printed or typed name and title

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. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.



Signature of Registered Agent

AUGUST 30, 2019

Date

If signing on behalf of an entity

SUZETTE M. MOORE

Typed or Printed Name

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