| The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. | | | | |
|--|--|-------|-----------------|------------|
| SIGNATURE | : SUSAN BOTTOM | | | 03/21/2017 |
| | Electronic Signature of Registered Agent | | | Date |
| Officer/Director Detail : | | | | |
| Title | Ρ | Title | VP | |
| Name | BOTTOM, SUSAN T | Name | BOTTOM, JAMES T | |

Address

City-State-Zip:

ST. AUGUSTINE, FL 32086

DOCUMENT# P99000067783

Current Principal Place of Business:

Current Mailing Address:

6916 CYPRESS LAKE COURT

6916 CYPRESS LAKE COURT ST. AUGUSTINE, FL 32086

FEI Number: 59-3592458

Name and Address of Current Registered Agent:

6916 CYPRESS LAKE CT.

City-State-Zip: SAINT AUGUSTINE FL 32086

BOTTOM, SUSAN PRESIDENT 6916 CYPRESS LAKE COURT ST. AUGUSTINE, FL 32086 US

Title Name Address

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: SUSANA T BOTTOM

PRESIDENT

03/21/2017

Electronic Signature of Signing Officer/Director Detail

Entity Name: CYPRESS POND ENTERPRISES, INC.

FILED Mar 21, 2017 Secretary of State CC5508451867

Certificate of Status Desired: No

6916 CYPRESS LAKE CT.

SAINT AUGUSTINE FL 32086

Date