Florida Department of State

Division of Corporations **Electronic Filing Cover Sheet**

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(((H17000223801 3)))



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To:

Division of Corporations

Fax Number

: (850)617-6380

AUG 23 2017

Account Name : INCORP SERVICES INC

Account Number : 120120000007 Phone : (702)866-2500

Fax Number

: (702)866-2689

the email address for this business entity to be used for future

K. '

##wal report mailings. Enter only one email address please.**

REGISTERED AGENT CHANGE 309-313 MERRICK ROAD CORP.

Certificate of Status	0
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H170002238013

COVER LETTER

	of Corporations	
SUBJECT:	309-313 MERRICK F	ROAD CORP.
	Name of Cor	poration
DOCUMENT N	TUMBER:F13000001609	
The enclosed Sta	atement of Change of Registered Office/	Agent and fee are submitted for filing.
Please return all	correspondence concerning this matter t	to the following:
	Janice N	ul
	Name of Contr	act Person
	InCorp Servic	es, Inc.
	Firm/Com	pany
	3773 Howard Hughes F	Parkway Suite 500S
	Addre	53
	Las Vegas, NV 891	169-6014
	City/State and	Zip Code
	documents@ir	ncorp.com
	E-mail address: (to be used for fut	ure annual report notification)
For further inform	mation concerning this matter, please cal	и.
	behalf of InCorp Services, Inc.	702 866-2500 ext. 6902
N	ame of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a \$35	5.00 check made payable to the Departm	ent 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

CR2E045 (03/12)

H170002338013

CR2E045 (03/12)

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

statement of chi	ange is submitted	for a corporation organ	12, 607.1508, or 617.1508, Florida nized under the laws of the State of ered agent, or both, in the State of	New '			
	the corporation:	_	ICK ROAD CORP.				
2. The principal	-	2637 E. Atlantic	Blvd., PMB #141				_
		Pompano Beacl	n, GL 33062	_		-	_
3. The mailing a	address (if differe	nt):					_
4. Date of incor	poration/qualifica	otion: 04/12/2013	Document number: F13	000001	609		_
5. The name and	d street address of		gent and registered office on file v		-		_
	Wiener, Da	_	•				
	2637 E.Atla	entic Blvd., PMB	14	_			
	Pompano E	Beach, FL 33062		_			
6. The name and (if changed):	d street address of	the new registered ager	nt (if changed) and /or registered o	ffice		17 AUG	<u>-</u> -i
	InCorp Sen	vices, Inc.		_	, w	5	;
	17888 67th	Court North			*	N-	ار! ا
		P.O. Box NOT	acceptable	-	16 €5	PH.	<u> </u>
	Loxahatche	e, FL 33470			12 P	89	
The street address changed will	ess of its registere be identical.	ed office and the street a	address of the business office of i	ts registere	d agen		
Such change was authorized by th	is authorized by r ie board, or the co	esolution duly adopted orporation has been not	by its board of directors or by an ified in writing of the change.	officer so			
7	re of an officer or direct		Daniel Wiener, Presid	ie			
			agree to act in this capacity. tes relative to the proper and con cept the obligation of my position of a change in the registered offic writing of this change.		ered , I		
Jan	ice ?	Jule /	August 7, 20	17			
	nalf of an entity:		Date				
Janice Null or	•	orp Services, Inc.					
-31		* * * FILING FEE	: \$35.00 * * *				
Ma	MAKE CHE	CKS PAYABLE TO FLOR	IDA DEPARTMENT OF STATE D. BOX 6327, TALLAHASSEE, FL. 3	2314			