

Division of Corporations

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet
F13000005322

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To:

Division of Corporations
Fax Number : (850)617-6380

S. CHATHAM

OCT - 4 2025

From:

Account Name : REGISTERED AGENTS INC.
Account Number : I20090000081
Phone : (307)200-2803
Fax Number : (813)436-5206

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

Email Address: _____

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**REGISTERED AGENT CHANGE
STRATEGIC FUNDING PARTNERS, INC.**

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$35.00

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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 Nevada _____ in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: STRATEGIC FUNDING PARTNERS, INC.
2. The principal office address: 4911 SW 91ST TERRACE, SUITE A
Gainesville FL 32608
3. The mailing address (if different): 4911 SW 91ST TERRACE, SUITE A Gainesville FL 32608
4. Date of incorporation/qualification: 12/11/2013 Document number: F13000005322
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)

CAPITOL CORPORATE SERVICES, INC.

515 E. PARK AVE., 2ND FL

TALLAHASSEE, FL 32301

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

Registered Agents Inc

7901 4th St N STE 300

P.O. Box NOT acceptable

St. Petersburg FL 33702

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.

Robin Jones
Signature of an officer or director

Robin Jones
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.

David Roberts
Signature of Registered Agent

10/03/2025
Date

If signing on behalf of an entity:

David Roberts
Typed or Printed Name

***** FILING 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)

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