

F15000001448

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

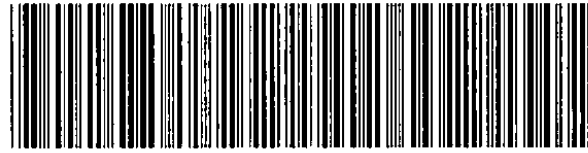
(Business Entity Name)

(Document Number)

1 Copies _____ Certificates of Status _____

al Instructions to Filing Officer:

Office Use Only



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RA & RO change

ALLAHASSEE, FLORIDA

2022 DEC 21 PM 3:14

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RECEIVED

FILED

A. RAMSEY

DEC 22 2022

Sunshine State Corporate Compliance Company

3458 Lakeshore Drive, Tallahassee, Florida 32312

(850) 656-4724

DATE 12/21/2022

****WALK IN****

ENTITY NAME 532 Corp

DOCUMENT NUMBER _____

****PLEASE FILE THE ATTACHED AND RETURN****

XXXXXX

Plain Copy

Certified Copy

Certificate of Status

****PLEASE OBTAIN THE FOLLOWING FOR THE ABOVE ENTITY****

Certified Copy of Arts & Amendments

Certificate of Good Standing

****APOSTILLE / NOTARIAL CERTIFICATION****

COUNTRY OF DESTINATION _____

NUMBER OF CERTIFICATES REQUESTED _____

TOTAL OWED \$125 35.00

ACCOUNT #: I20160000072

S R JH

Please call Tina at the above number for any issues or concerns. Thank you so much!

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: 532 CORP.
Name of Corporation

DOCUMENT NUMBER: F15000001448

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:

PRITPAL S. KOCHHAR

Name of Contact Person

532 CORP.

Firm/Company

P.O. Box 1929

Address

NEW YORK NY 10156

City/State and Zip Code

pskochhar@msn.com [pskochhar@msn.com]

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

For further information concerning this matter, please call:

PRITPAL S. KOCHHAR

Name of Contact Person

at (917) 587-8596

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
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

**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 New York in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: 532 CORP.
2. The principal office address: 401 Park Avenue South, Suite 10-079
New York, NY 10016
3. The mailing address (if different): P.O. Box 1929, NEW YORK, NY 10156
4. Date of incorporation/qualification: 04/06/2015 Document number: F15000001448
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)

MATT MATTHEWS

277 Pinewood Drive

TALLAHASSEE, FL 32303

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

Incorporating Services, Ltd.

1540 Glenway Drive

P.O. Box NOT acceptable

Tallahassee, FL 32301

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.

Pritpal S. Kochhar

Signature of an officer or director

PRITPAL S. KOCHHAR, 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.

Renee T. Kent

Signature of Registered Agent

12/21/2022

Date

If signing on behalf of an entity:

Renee T. Kent, Assistant Secretary

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

CR2B045 (04/13)

2022 DEC 21 PM 12 13

FILED