## F18000004344

(Requestor's Name)					
(Addross)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					





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04/19/22--01010--027 \*\*35.00

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A. BUTLER JUN - 6 2022

## **COVER LETTER**

Office: Agent and fee are submitted for filing.
atter to the following:
mpliance.com
eport notification)
ase call:
at () 717-459-9173 Area Code & Daytime Telephone Number
Area Code & Daytime Telephone Number
epartment of State.
Street Address:
Amendment Section
Division of Corporations The Centre of Tallahassee
2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

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CR2E045 (04/13)

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

statement of cha	inge is submitted for a corporation	17,0502, 607,1508, or 617,1508, Florida organized under the laws of the State of registered agent, or both, in the State of i	DE		
1. The name of t	the corporation; ETERNAL SM	IOKE, INC.			
		er Drive, STE 1, ORLANDO, FL 3	2804		
3. The mailing a	iddress (if different): 1321 Edge	ewater Drive, STE 1, ORLANDO,	FL 32	804	
	poration/qualification: 09/17/20				
	I street address of the current regis timent of State: (If resigned, enter)	tered agent and registered office on file w resigned)	rith the		
	MUTH, ANGELA DENISE		_		
	1321 Edgewater Drive, ST	E1	- 10	~	
	ORLANDO, FL 32804		TAL,	2022 APR	ध्यस्य
6. The name and (if changed):	I street address of the new register	ed agent (if changed) and /or registered of	第二 公	9	
	Registered Agents Inc.		SEE's	AH S	D
	7901 4th St N STE 300			9: 39	_
		P.O. Box NOT acceptable			
	St. Petersburg F1, 33702		_		
The street address changed will	ess of its registered office and the be identical.	street address of the business office of i	is regis	tered	agent,
Such change wa authorized by the	as authorized by resolution duly a ne board, or the corporation has b	idopted by its board of directors or by ar een notified in writing of the change.	ı office	r so	
/s/ HUHN,	PELIN MATYAR	HUHN, PELIN MATYAR ,	CEO		
Signatu	re of an officer or director	Printed or typed name and i	utle		
I further agrée of my duties, an document is bei	the appointment as registered ag to comply with the provisions of a ad I am familiar with and accept t ing filed merely to reflect a chang s been notified in writing of this c	gent and agree to act in this capacity, all statutes relative to the proper and cos he obligation of my position as register te in the registered office address. I here hange.	mplete ed agen eby con	perfor t. Or tirm tl	mance if this rat the
Bee 1	nature of Registered Agent	04/14/2022			
Sig	nature of Registered Agent	Date			
If signing on bo	half of an entity:				
Bill Havre		_			
ſ	yped or Printed Name				

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