Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : REGISTERED AGENT SOLUTIONS INC

Account Number : I20100000062 Phone : (888)705-7274 Fax Number : (888)706-7274

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Email	Address:	

REGISTERED AGENT CHANGE GENERX OF DELAWARE, INC.

Certificate of Status	0
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Corporate Filing Menu

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COVER LETTER

TO:

Amendment Section Division of Corporations

GENERX OF DELAWARE, INC. Name of Corporation F21000005842 DOCUMENT NUMBER: 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: Alicia Richards Name of Contact Person Registered Agent Solutions, Inc. Firm/Company Corporate Center One, 5301 Southwest Pkwy, Ste 400 Address

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

For further information concerning this matter, please call:

Alicia Richards

Austin, Texas 78735 City/State and Zip Code

Name of Contact Person

Area Code & Davtime 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

CR2E045 (04/13)

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

statement of cha	provisions of sections 607,0502, 617,05 inge is submitted for a corporation orga ir to change its registered office or regis	mized under the la	ws of the State of	Delaware	_	
2. The principal	the corporation: GENERX OF office address: 3910 RCA Blv each Garden, FL 33410				_ _ _	
-	address (if different): 21218 St And				_	
4. Date of incorp	poration/qualification; 10/13/202	1 Document	number: F210	00005842		
	I street address of the current registered tment of State: (If resigned, enter resign		ed office on file w	rith the		
·	CT CORPORATION 1200 SOUTH PINE ISLAND RO	N SYSTE	M			
	PLANTATION	FL	33324	2023 SEP 14 SEULLAHA	العائب	
(ii changed):						
	AMID: I					
		L 3230	08	- m -		
	ess of its registered office and the street be identical.				ıt,	
Such change was authorized by th	is authorized by resolution duly adopte the board, or the corporation has been no	d by its board of o ptified in writing	directors or by an of the change.	officer so		
S/ Charles :	Richardson		ichardson		-	
further agrée t if my duties, an locument is bei	the appointment as registered agent as o comply with the provisions of all sta d I am familiar with and accept the ob ng filed merely to reflect a change in th been notified in writing of this change	tutes relative to th ligation of my pos he registered offic	te proper and con tition as registere	ed agent. Or. if ti	his	
Мо	سعيد طنا	09/14/20	23			
	sature of Registered Agent		Date		-	
f signing on bel	half of an entity:					
	r, Assistant Secretary					
	* * * FILING FI	EE: \$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)