F21000007384

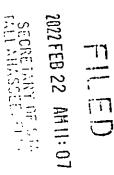
(Requestor's Name)						
(Address)						
(Address)						
(City/State/Zip/Phone #)						
PICK-UP WAIT MAIL						
(Business Entity Name)						
(Document Number)						
Certified Copies Certificates of Status						
Special Instructions to Filing Officer:						
J. HORNE						
FEB 2 8 2022						

Office Use Only



900382149629

02/22/23--01003--013 **35.00



COVER LETTER

TO:	Amendment Section Division of Corporations	,		
SUBJ Name	ECT: ShaPieLou, INC of Corporation			
DOC	UMENT NUMBER: F21000007384	· · · · · · · · · · · · · · · · · · ·		
The er	nclosed Statement of Change of Registered	Office/Agent and	fee are submitted for filing.	
Please	return all correspondence concerning this i	matter to the follow	ving:	
Sharoi	a Pierre-Louis			
	of Contact Person			
ShaPid	Lou, INC			
Firm/0	Company			
1530 V	V Boynton Beach Blvd #3451			
Addre	SS			
Boynto	on Beach, FL 33436			
City/S	tate and Zip Code			
	sharonpierrelouis@gmail.com			
E-ma	il address: (to be used for future annual	report notificatio	<u>n)</u>	
For fu	rther information concerning this matter, pl	lease call;		
Sharor	Pierre-Louis	at (323	1479 - 6872	
-	Name of Contact Person	Area () 479 - 6872 Code & Daytime Telephone Numbe	Г
Enclo	sed is a \$35.00 check made payable to the I	Department of State	e.	

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

CR2F045 (04/13)

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

statement of ch	provisions of sections 607.0502, 617.0, ange is submitted for a corporation org er to change its registered office or regi	anized under the laws of the State of $\underline{1}$	Florida	this	_
1. The name of	the corporation: ShaPieLou, INC	· ·			
2. The principal	office address: 1530 W Boynton Beach I	Blvd #3451 Boynton Beach, FL 33436			_
3. The mailing	address (if different):				
4. Date of incor	poration/qualification: 01.01.2022	Document number: F2100000	7384		
	d street address of the current registered rtment of State: (If resigned, enter resigned)		h the		
	Sharon Pierre-Louis				
	2606 SW 23rd Cranbrook Dr.				
	Boynton Beach, FL 33436				
6. The name and street address of the new registered agent (if changed) and /or registered of (if changed):		SECRET	2022 FEB 22	log I	
	Sharon Pierre-Louis		.SS:	22	
	1530 W Boynton Beach Blvd #3451				
P.O. Box, NOT acceptable				O :II HV	·
	Boynton Beach, FL 33436		; -	07	
The street address changed will	ess of its registered office and the stree be identical.	et address of the business office of its	register	ed age	nt,
Such change wantberged by the	as authorized by resolution duly adopt he board, or the corporation has been r	ed by its board of directors or by an contified in writing of the change.	officer so	ວ	
Signatu	re of sh officer or director	Sharon Pierre-Louis, President Printed or typed name and till	e ⁻		_
I hereby accept I further agree of my duties, ar document is bet	the appointment as registered agent a to comply with the provisions of all sto ad I am familiar with and accept the ol ing filed merely to reflect a change in a s been notified in writing of this chang	ind agree to act in this capacity. atutes relative to the proper and com bligation of my position as registered the registered office address. I hereb	nlete nei	forma Or, if i n that	nce this the
Ma	n hene-	02.18.2022			_
	mature of Registered Agent	Date			
If signing on be	chalf of an entity:				
Sharon Pierre-Lo					
ĩ	yped or Printed Name				

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