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FILED Sep 22, 2023 08:00 AM Secretary of State

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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

## FILED Sep 22, 2023 08:00 AM-Secretary of State

SUBJECT: TRADESCORTS TEZIL NOLOGY HUCHINGS INC.
DOCUMENT NUMBER: F 22000001635
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:
RONARD BERNSTEIN
Name of Contact Person TRACS PORTS TECHNOLOGY TOLAINGS IN C
Firm/Company
TOO MIGHT PASS FD
Address SAPASOTA FL 3+212 City/State and Zin Code
City/State and Zip Code
PON. BERNSTEINGTRM-SPORTS. COM
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Pow Barnstein at 201 60 523  Name of Contact Person at 201 60 523  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

CR2E045 (04/13)

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

statement of chan	rovisions of sections 607.0502, 617.0502, 607.1508, or 617.1508. Florida Statutes, this ge is submitted for a corporation organized under the laws of the State of DELAWARE to change its registered office or registered agent, or both, in the State of Florida.
1. The name of th	re corporation: TRANESTORIS TEZIT ACLOGG HOLDINGS 111C.
2. The principal of	SAPASOTA: FC 34242
	SAPASOTA +C 34242
3. The mailing ad	oration/qualification: 11/7/2017 Document number: F22000001635 FC
4. Date of incorpo	pration/qualification: 11/7/7017 Document number: F22000001635
	street address of the current registered agent and registered office on file with the ment of State: (If resigned, enter resigned) $34242$
	CORRESTATE SERVICES COMPANS
•	1201 HAY ST
-	TALLAHASSEE, FL 32301
6. The name and street address of the new registered agent (if changed) and /or registered of Sep 22, 2023 08:00 AM  Sep 22, 2023 08:00 AM  Secretary of State  P.O. Box Not acceptable	
•	7500 MIDNIGHT PASS PL
- -	SARASO, A- C 34242
The street addres as changed will b	s of its registered office and the street address of the business office of its registered agent, be identical.
Such change/was authorized by the	authorized by resolution duly adopted by its board of directors or by an officer so by architecture corporation has been notified in writing of the change.
Signature	of an officer or director  Printed or typed name and title
I furthër agrëe to of my dutiës, and	he appointment as registered agent and agree to act in this capacity.  o comply with the provisions of all statutes relative to the proper and complete performance. I am familiar with and accept the obligation of my position as registered agent. Or, if this g filed merely to reflect a change in the registered office address. I hereby confirm that the been notified in writing of this change.  ZONTO PURE 511
Signa	iture of Registered Agent Date
If signing on beh	alf of an entity:
Туг	oed gr-Printed Name

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE