F23000005412

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2024 GCT 23 PM 2: 49

DEC 0 2 2024

COVER LETTER

TO: Amendment Section Division of Corporations	
SUBJECT: Tykbnker Corporation Name of Corporation	
Name of Corporation	
DOCUMENT NUMBER: F23 000005412	
The enclosed Amendment and fee are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
Mary Ote in Name of Contact Person	
Name of Contact Person	
OTERO CPA, LLC Firm/Company	
Firm/Company	
1607 Ponce de Leon Blud, Svite 109	
Coral Gables, FL 33134 City/State and Zip Code	
Info @ oterveja. com E-mail address: (to be used for future annual report notification)	2024 (
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	N 5mm
Mary Otero at (286) Name of Contact Person Area Code &	557 - 25/2 Daytime Telephone Number
Name of Contact Person Area Code &	Daytime Telephone Number , 73%
Enclosed is a check for the following amount:	2:49
□\$35 Filing Fee □ \$43.75 Filing Fee & □ \$43.75 Filing Certificate of Status □ \$43.75 Filing Certified Copy	g Fee & S52.50 Filing Fee.

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

PROFIT CORPORATION APPLICATION BY FOREIGN PROFIT CORPORATION TO FILE AMENDMENT TO APPLICATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

(Pursuant to s. 607.1504, F.S.)

SECTION I (1-3 MUST BE COMPLETED)

F23	000005412				
	00000 5/12 (Document number of corporation (if known)	.			
1. Tykbroker Corpora Fro (Name of corpo 2. Delaware (Incorporated under laws	71		_		
(Name of corpo	ration as it appears on the records of the Depart	iment of State)			
2. <u>Belaware</u>	3. 09/06/2	2023			
(Incorporated under laws	of) (Date author	rized to do business in F	lorida)	J	
(4-7 CO	SECTION II MPLETE ONLY THE APPLICABLE CHA	NGES)			
4. If the amendment changes the name of the co	rporation, when was the change effected under	the laws of its jurisdiction	on of		
incorporation?					
 (Name of corporation after the amendment, a not contained in new name of the corporation 	dding suffix "corporation," "company," or "inc	corporated," or appropris	ite abb	reviati	on, i
(If new name is unavailable in Florida, enter a	alternate corporate name adopted for the purpos	se of transacting busines	s in Flo	orida)	
6. If the amendment changes the period of	duration, indicate new period of duration.		() ·	207	
				0 1/2	
				二	
	(New duration)		1	23	í
			,	70	5
7. If the amendment changes the jurisdiction	on of incorporation, indicate new jurisdiction.	_	STATE STATE	23 22	1.00
****		· · · · · · · · · · · · · · · · · · ·	≀ >	Ţ.,	
	(New jurisdiction)	•	171	9	
S. If amending the registered agent and/or renew registered agent and/or the new registered ag	egistered office address in Florida, enter the	name of the			
new registered agent and/or the new regis	tered office address.				
Name of New Registered Agent					
	(Florida street address)				
New Registered Office Address:		, Florida		-	
	(City)	(Zip Code	y		
New Registered Agent's Signature, if cha	nging Registered Agent:	n a ana			
I hereby accept the appointment as registere	d agent. I am familiar with and accept the obl	ugations of the position.			
Signature of New Register	ed Agens, if changing				

9. If the amendment changes person, title or capacity in accordance with 607.1504 (4), indicate that change: Type of Action Title/ Capacity Address <u>Name</u> Santiago Figuereo 5200 Blue Lagoun Dr., □Add Svite 235 Miami FL, 33126 DRemove Secretary Rosanna Egyerev 5200 Blue Laypion Dr., DAdd Svite 235 Miami, FL 33126 Remove Treasurer Laura Figuereu 5200 Blue Lagron Dr., DAdd Suite 235 Miami, Fl 33126 Demove Director Louis Manuel Silves ke 10B8 Canopy Tree, CT DANGE Orlando, FL 32838 □Add

Attached is a certificate or document of similar import, evidencing the amendment, authenticated not more than 90 days prior to delivery of the application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the laws of which it is incorporated.

(Signature of a director, president or other officer - if in the hands of a receiver of other court appointed fiduciary, by that fiduciary)

Avis M. Saluske

(Typed or printed name of person signing)

(Title of person signing)

FILING FEE \$35.00