## L1300042115

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

Office Use Only



300449920783

04/30/25--01031--016 \*\*35.00



## **COVER LETTER**

TO:

TO: Amendment Section Division of Corporations
SUBJECT: Total TUNKEY RESOURCES Name of Corporation
DOCUMENT NUMBER: <u>L 13000042115</u>
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:
Denise Iannuzzi
Name of Contact Person, Tynkell Resources LLL
251D Dayset St
Address  My Wels boro, TN 37130  City/State and Zip Code total turnley @ att. net
total turn Ley @ att. net
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Name of Contact Person at (954, 87) 3800  Area Code & Davime Telephone Number
Name of Contact Person 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

Amendment Section Division of Corporations The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

**Street Address:** 

CR2E045 (04/13)

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

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this	
statement of change is submitted for a corporation organized under the laws of the State of You law in order to change its registered office or registered agent, or both, in the State of Florida.	
TILT WAR DRANKER LIFE	
1. The hante of the corporation.	
2. The principal office address: $\frac{2510 \text{ DoYSP} + 5+}{27130}$	
MUTHERSDOTO, TN 37130	
3. The mailing address (if different):	سر
4. Date of incorporation/qualification: 3 20 20 3 Document number: 4 0000 4211	7
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)	
Joy Kelley	
Toy Kelley  10324 NW 2nd DR	
$V_0 \vee V_1 \circ V_1 \circ V_1 \circ V_2 \circ V_1 \circ V_1 \circ V_2 \circ V_1 \circ V_1 \circ V_2 \circ V_1 \circ V_2 \circ V_1 \circ V_2 \circ V_1 \circ V_2 \circ V_2 \circ V_2 \circ V_1 \circ V_2 \circ V_2 \circ V_2 \circ V_1 \circ V_2 $	
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):	1
Carmenza Betanwort	
USUZ BOLA DEL MAR Drive HP13	24
BOLA Ration FL 33433	
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.	
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.	•
Signature of an office or director	בלחתי
I hereby accept the appointment as registered agent and agree to act in this capacity.  I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.	
Signature of Registered Agent Date	
If signing on behalf of an entity:	
Carmenza Betancourt	
Typed or Printed Name	

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (04/13)

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