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## COVER LETTER

то:	Amendment Section
	<ul> <li>Division of Cornotations</li> </ul>

SUBJECT: Name of Corporation

DOCUMENT NUMBER: NO 1000000 7 L138

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:

Name of Contact Person

(Stand Herry Humb, Inc., Firm/Company)

San Empraral Forest Ct.

Address

Sunfand Forest Ct.

City/State and Zip Code

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

For further information concerning this matter, please call:

Name of Contact Person Jewe at (33) 947-0435

Area Code & Daytime Telephone Number

407-203-177

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
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## 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 [-10516] in order to change its registered office or registered agent, or both, in the State of Florida. 1. The name of the corporation: ( 3. The mailing address (if different): 3010 Document number: <u>ND6 00070153</u> 4. Date of incorporation/qualification: ( 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) 6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):  $\alpha$ 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. hereby accept the appointment as registered agent and agree to act in this capacity.
Iffurther 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 have by confirm that the corporation has been notified in writing of this change. If signing on behalf of an entity:

Make checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

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