

N13000006380

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

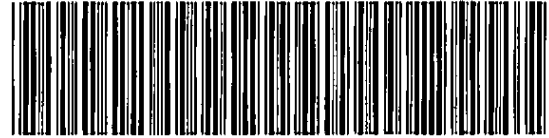
(Business Entity Name)

(Document Number)

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A. RAMSEY
FEB 21 2023

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: CODA'S KIDZ, Inc
Name of Corporation

DOCUMENT NUMBER: N 13000006380

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:

Donna R. Fernandez

Name of Contact Person

CODA'S KIDZ, Inc.

Firm/Company

13762 W State Road 84 Suite 134

Address

Davie, FL 33325-5304

City/State and Zip Code

codalinkinc@comcast.net

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

For further information concerning this matter, please call:

Donna R. Fernandez

Name of Contact Person

at (860)

5388-958

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

**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 Florida in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: CODA'S KIDZ, Inc.
2. The principal office address: 13762 W State Road 84 Suite 134
Davie, FL 33325-5304

3. The mailing address (if different): _____

4. Date of incorporation/qualification: 7/17/2013 Document number: N 13000006380

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)

Guy Sperduto
8963 Stirling Road Suite 101
Cooper City, FL 33328

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Donna R. Fernandez
13762 W State Road 84 Suite 134
P.O. Box NOT acceptable
Davie, FL 33325-5304

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.

Donna R. Fernandez
Signature of an officer or director

Donna R. Fernandez President
Printed or typed name and title

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.

Donna R. Fernandez
Signature of Registered Agent

11/22/22
Date

If signing on behalf of an entity:

Donna R. Fernandez
Typed or Printed Name

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

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