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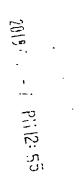
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COVER LETTER

	endment Section ision of Corporations		
SUBJECT:	Region I. Lamb Ath Name of Corpo	letics: Arts Academy	
DOCUMENT NUMBER: NIS00000 2775			
The enclose	ed Statement of Change of Registered Office/A	gent and fee are submitted for filing.	
Please retur	n all correspondence concerning this matter to	the following:	
	Camelon Lamb Name of Contac		
	Pregina T Land Atto	Letics: Arts Academy	
	204' 27 NW OHA AUCASS	<u>e</u>	
Miam Girdens, Fl 33169 City/State and Zip Code			
	E-mail address: (to be used for future	na. . Com re annual report notification)	
For further information concerning this matter, please call:			
Came	Ion Land Name of Contact Person	1(305)399-4337	
	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	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 Florida. in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: Regina T. Land Athletics: Arts Academy Foc.
2. The principal office address: 20427 NW 9th tue, Miami Gaters, FI
33169
3. The mailing address (if different): 1455 NW 183 St, Miami Garders, Fl 33/69
4. Date of incorporation/qualification: March 29, 2015 Document number: N 150000 2775
 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)
Camelon Lamb
1395 W Sunrise Blue 2
_ Ft. Landerdate, F1 33169
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
(if changed): Canelon Lamb
P.O. Box NOT acceptable
Miani, Fl 33169
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.
Camelon Land Director
Signature of an officer or director 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 18 2 1 9
If signing on behalf of an entity:
Cunclon Lamb Typed or Printed Name

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

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