N15000007549

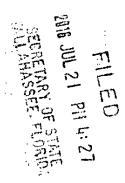
(Requestor's Name)
(Address)
((Address)
	(City/State/Zip/Phone #)
PICK-UP	WAIT MAIL
	(Business Entity Name)
	(Document Number)
Certified Copies	Certificates of Status
Special Instructions	to Filing Officer:

Office Use Only



700287334297

07/21/16--01010--004 **35.00



COVER LETTER

TO: Amendment Section Division of Corporations		
SUBJECT: The Blassing bags Project Inc., Name of Conformation		
DOCUMENT NUMBER: N 15 00 00 0 7549		
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		
He BlESSing Bags Project		
5416 14th AVENUE DR W		
Bradenton, F2 34209 City/State and Zip Code		
BETSY PLANTE @ AOL. COM E-mail address: (to be used for future annual report notification)		
For further information concerning this matter, please call:		
Name of Contact Person at (94) 120 - 1120 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 ofin order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: The BISSING BAGS Project, Inc. 2. The principal office address: 5416 14th Avenue De W Bradenta, FL 34209
3. The mailing address (if different):
4. Date of incorporation/qualification: $8/9/20/5$ Document number: $10/500000005999$
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)
United States Corporation Agents Ikc
13302 Winding Oaks Blud StEA
1ampa, FL 33612
6. The name and street address of the new registered agent (if changed) and /or registered office; (if changed):
Lauren B Plante 50 1
5416 14th AUENUE DRIVE W
Bradenton, FL 34209
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 officer or director National Signature of an officer or director National Signature of an officer or director Signature of Signature
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:
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 (03/12)

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