

N16000005017

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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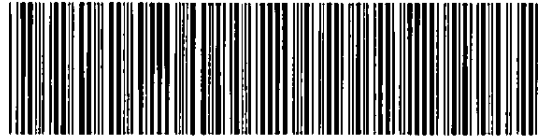
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: People for Urban and Rural Education
Name of Corporation

DOCUMENT NUMBER: N16000005017

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:

Archana Purini

Name of Contact Person

People for Urban and Rural Education

Firm/Company

1525 US Hwy 380 Suite 500 #109

Address

Frisco, TX 75033

City/State and Zip Code

info@pureonline.org

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

For further information concerning this matter, please call:

Vasavi Talluri

Name of Contact Person

at (904) 955-1477

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: People for Urban and Rural Education

2. The principal office address: 7901 4th St N STE 300
St. Petersburg FL 33702

3. The mailing address (if different): 1525 US Hwy 380, Suite 500 #109, Frisco TX 75033

4. Date of incorporation/qualification: 05/13/2016 Document number: N16000005017

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)

Vasavi Talluri
155 Bartram Market Dr Suite 135 #144
St Johns FL 32259

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

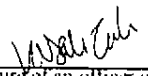
Registered Agents Inc
7901 4th St N STE 300
St. Petersburg FL 33702

P.O. Box NOT acceptable

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ALL INFORMATION CONTAINED
HEREIN IS UNCLASSIFIED
DATE 09-10-2024 BY 60322
UCBA

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

Vasavi Talluri
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.


Signature of Registered Agent

09/10/2024
Date

If signing on behalf of an entity:

David Roberts
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)