N18000001963

(Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
(-),			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
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COVER LETTER

Amendment Section

TO:

Division of Corporations

SUBJECT: HALLYMAX & TOWNYOME OWNESS PRESCRIPTION

Name of Corporation

DOCUMENT NUMBER: N & OODOO 19423

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:

Alexy Daysea

Name of Contact Person

Address

Address

Livident & Many (Mespot Com

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

For further information concerning this matter, please call:

Glenn Daysea

Name of Contact Person

at (850, 453-5555)

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

CR2E045 (04/13)

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 61 statement of change is submitted for a corporation in order to change its registered office or r	organized under the laws of the	State of
1. The name of the corporation: HUII MAXIC 2. The principal office address: 3450 HWV		
3. The mailing address (if different):		
4. Date of incorporation/qualification: 10115 120	Document number:	N1K0000019163
5. The name and street address of the current register Florida Department of State: (If resigned, enter re		on file with the
De Hortun, Inc.		
2450 Hmy 29 S. S	ste1.	
Canton ment FL		
6. The name and street address of the new registered (if changed):	d agent (if changed) and /or regi	stered office
my Home Spot Co	<u>Μ</u>	<i>က</i>
nny Itanne Spor Co 2005 N Pace Blug		
Pensacua, Fl 305		
The street address of its registered office and the sas changed will be identical.	street address of the business o	ffice of its registered agent,
Such change was authorized by resolution duly acauthorized by the board, or the corporation has be		
Aaron Chatraw (Nov 24, 2020 15:22 CST)	Aaron Chatraw	President
Signature of an officer or director I hereby accept the appointment as registered age I further agree to comply with the provisions of a of my duties, and I am familiar with and accept th document is being filed merely to reflect a change corporation has been notified payoriting of this ch	ll statutes relative to the proper we obligation of my position as win the registered office addres	acity
	Nov 24, 20	20
Signature of Registered Agent	Dat	e
If signing on behalf of an entity:		
Typed or Printed Name		
* * * BH IN	G 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)