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(Re	questor's Name)	
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TO:

Amendment Section

Division of C	Sorphiations	
SUBJECT:	y's Angels, Inc.	
Name of Corporation	1	
DOCUMENT NUM	N18000012520	
The enclosed Statem	ent of Change of Registered	Office/Agent and fee are submitted for filing.
Please return all corr	espondence concerning this	matter to the following:
acquelyn Allen		
Name of Contact Per	rson	
Bonaquist I Allen		
Firm/Company 4099 Tamiami Trail No	orth, Suite 308	
Address	 	
Naples, FL 34103		
City/State and Zip C		
	Eservice@bonaquis	tallenlaw.com
E-mail address: (to	be used for future annual	report notification)
For further informati	on concerning this matter, p	lease call:
acquelyn Allen, Esq.		239 276-7127 at ()
Nam	e of Contact Person	Area Code & Daytime Telephone Num

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

\cdot . STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of ch	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida 8 unge is submitted for a corporation organized under the laws of the State of $_$ or to change its registered office or registered agent, or both, in the State of F	Florid	da	
	the corporation: Solution			
	address (if different): 2383 Linwood Ave Suite 307, Naples, FL 34112 11/28/2018 Document number: N1800001			
4. Date of incor	poration/qualification: Document number: N1800001	2520 ——		
5. The name an	d street address of the current registered agent and registered office on file wit			
	United States Corporation Agents, Inc			
	476 Riverside Ave			
	Jacksonville, F1, 32202			
6. The name an (if changed):	d street address of the new registered agent (if changed) and /or registered off	ice	2023 MAR -	
	Bonaquist I Allen		!	
	4099 Tamiami Trail North, Suite 308		H.	المناسبة
	P.O. Box NOT acceptable Naples, FL 34103	:	ر. ا _ن ن	
The street addras changed will	ess of its registered office and the street address of the business office of its be identical.	regis	stered .	agent.
Such change wauthorized by t	as authorized by resolution duly adopted by its board of directors or by an one board, or the corporation has been notified in writing of the change.	affice	r so	
Signati	Faith Schwa Printed or typed name and till	<u>l</u> ba	ack	<u></u>
I hereby accept I further agree of my duties, ar document is be, corporation ha	the appointment as registered agent and agree to act in this capacity, to comply with the provisions of all statutes relative to the proper and comed I am familiar with and accept the obligation of my position as registered in a filed merely to reflect a change in the registered office address. I hereby seen notified in writing of this change.	plete ' ageñ y con	perfor u. Or, firm th	mance if this act the
Jacque	halpire of Registered Agent 2 23 2023			
V If signing on bo	half of an entity:			
Bong	iquist Allen			

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