Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : PARASEC

Account Number : I20180000086

Fax Number

: (916)576-7000 : (800)603-5868

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. ** [7]

Email	Address:	• 1
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REGISTERED AGENT CHANGE MELGES 20 INC.

Certificate of Status	0
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Page Count	01
Estimated Charge	\$35.00

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Corporate Filing Menu

Help

To: 18506	176380 From	: 19165767049	Date:	05/12/23	Time:	11:23	PM	Page:	03/	03
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STATEMEN FOR CORPO	T OF CHANGE OF REGISTERED O DRATIONS	FFICE OR REGISTERED AGE	NT OR BOTH				
statement of cha	provisions of sections 607.0502, 617.0502 ange is submitted for a corporation organi er to change its registered office or registe.	zed under the laws of the State of \overline{FL}	· · · · · · · · · · · · · · · · · · ·				
1. The name of	the corporation: MELGES 20 INC.						
	office address: 266 W 23rd Street Hialcah,	FL 33101					
3. The mailing a	address (if different): 3580 NW 54th St #53	09 Miami, FL 33142					
4. Date of incorp	poration/qualification: 08/27/2019	Document number: N190000090)85				
5. The name and Florida Depar	d street address of the current registered ag runent of State: (If resigned, enter resigned	ent and registered office on file with	the				
	Registered Agent Resigned: 05/04/2023		. 1 8				
	Registered Agent Resigned: 05/04/2023						
	Registered Agent Resigned: 05/04/2023		5				
6. The name and (if changed):	i street address of the new registered agent	(if changed) and /or registered office	2003 HAY 15 AM 9: 02				
	Rocket Lawyer Corporate Services LLC		四語				
	155 Office Plaza Drive, 1st Floor						
	P.O. Box NOT acceptable Taliahassee, FL 32301						
	ess of its registered office and the street as be identical.						
Such change was authorized by th	is authorized by resolution duly adopted le board, or the corporation has been noti	by its board of directors or by an officed in writing of the change.	icer so				
K	Sole	Keiran Searle	Manager				
l hereby accept	the appointment as registered agent and to comply with the provisions of all statuted I am familiar with and accept the obliging filed merely to reflect a change in the been notified in writing of this change.	Printed or typed name and trile agree to act in this capacity, es relative to the proper and compleation of my position as registered agrees, I hereby consistered office address, I hereby consistered office address.	ete performance gent. Or, if this onfirm that the				
Zashna W	1412	5.12.2023					
	nature of Registered Agent	Date					
If signing on bel	·						
LUNA PERR	Y ASST SECRETARY Rocket Lav	vyer Corporate Services LLC					

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

Typed or Printed Name