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## **COVER LETTER**

TO: Amendment Section Division of Corporations	.*
SUBJECT: AETO - YOU //IC Name of Corporation	
DOCUMENT NUMBER: <u>A/2000205001</u>	
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:	
TYALIE DEAL Name of Contact Person  AETO - YOU ILIC Firm/Company  6511 NOVA DEIVE #164  Address	
DAVIE FL 33317 City/State and Zip Code	
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
TYAME DEAL at (954) 243-5759  Name of Contact Person Area Code & Daytime Telephone to	<u> </u>
Name of Contact Person Area Code & Daytime Telephone I	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, 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 in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: A-E-I-O-YOU MC
2. The principal office address: 6511 NOVA DEWE #164 DAVIE, FL 33317
3. The mailing address (if different):
4. Date of incorporation/qualification: Document number:
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)
TYANE DEAL
2620 5. UNIVERSITY DC APT 202
DAVIE, FL 3.3.328
DAVIE, FL 33328  6. The name and street address of the new registered agent (if changed) and /or registered office AAA (if changed):
THANKE DEAL  65/1 LIOVA DELVE # 164
6511 NIOVA DELVE # 164 P.O. Box NOT acceptable
DAVIE, FL 33317
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  TYANE DEAL PRESIDENT  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  7/20/2020 Date
If signing on behalf of an entity:
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