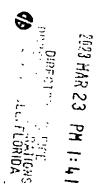
(Requestor's Name)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
Certified Copies Certificates of Status		
Special Instructions to Filing Officer:		
J. HORNE MAR 24 2023		

Office Use Only



 \mathcal{G}



FLORIDA FILING & SEARCH SERVICES, INC.

P.O. BOX 10662 TALLAHASSEE, FL 32302 155 Office Plaza Dr Ste A Tallahassee FL 32301 PHONE: (800) 435-9371; FAX: (866) 860-8395

DATE:

03/23/2023

NAME: THE CORAL ARK, INC.

TYPE OF FILING: CHANGE OF REGISTERED AGENT

COST:

35.00

RETURN: PLAIN COPY PLEASE

ACCOUNT: **FCA00000015**

AUTHORIZATION: ABBIE/PAUL HODGE

COVER LETTER

TO: Amendment Section Division of Corporations				
SUBJECT: THE CORAL ARK, INC. Name of Corporation				
DOCUMENT NUMBER: N20000007746				
The enclosed Statement of Change of Registered Office	ce/Agent and fee are submitted for filing.			
Please return all correspondence concerning this matt	er to the following:			
Sierra Campos				
Name of Contact Person				
First Corporate Solutions				
Firm/Company				
914 S St				
Address				
Sacramento CA 95831				
City/State and Zip Code				
RAServices@ficoso.com				
E-mail address: (to be used for future annual repo	ort notification)			
	,			
For further information concerning this matter, please call:				
Sierra Campos	at (916) 3138900			
Name of Contact Person	at (916) 3138900 Area Code & Daytime Telephone Number			
Enclosed is a \$35.00 check made payable to the Department of State.				
Mailing Address: Amendment Section	Street Address: Amendment Section			
Division of Corporations	Division of Corporations			
P.O. Box 6327	The Centre of Tallahassee			
Tallahassee, FL 32314	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

statement of cha	nge is submitted for a corporation	17.0502, 607.1508, or 617.1508, Florida Statut corganized under the laws of the State of Florid registered agent, or both, in the State of Florid	<u>a</u>
The name of t	he corporation: THE CORAL ARE	K, INC.	
2. The principal	office address: 22287 MULHOLLA	AND HWY, #334	
CALABASAS, C			
3. The mailing a	ddress (if different):		
4. Date of incorp	poration/qualification: 07/21/2020	Document number: N20000007746	<u> </u>
	street address of the current registment of State: (If resigned, enter	tered agent and registered office on file with the resigned)	•
	NONE		
			125 N
			(S)
6. The name and (if changed):	street address of the new registers	ed agent (if changed) and /or registered office	MR2
	FIRST CORPORATE SOLUTION	IS, INC.	· · · · · · · · · · · · · · · · · · ·
	155 OFFICE PLAZA DR.		ZI H.
		P.O. Box NOT acceptable	
	TALLAHASSEE, FL 32301		~~
The street addre as changed will	ss of its registered office and the be identical.	street address of the business office of its regi	stered agent,
Such change wa authorized by th	s authorized by resolution duly a le board, or the corporation has b	dopted by its board of directors or by an office een notified in writing of the change.	er so
NO P		Printed or typed name and title	
	e of an officer or director		
I hereby accept I further agree t of my duties, an document is bein corporation has	the appointment as registered ag o comply with the provisions of a d I am familiar with and accept t ng filed merely to reflect a chang been notified in writing of this c	tent and agree to act in this capacity, all statutes relative to the proper and complete the obligation of my position as registered age te in the registered office address. I hereby con hange.	performance nt. Or, if this nfirm that the
sierra	compos nature of Real stered Agent	03/03/2023	
Sign	nature of Registered Agent	Date	
If signing on bel	half of an entity:		
Sierra Campos, F	irst Corporate Solutions, Inc.		
Ty	ped or Printed Name	-	

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