N2000008463

(Requ	estor's Name)	
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(City/s	State/Zip/Phone	e #)
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COVER LETTER

TO: Amendment Section Division of Corporations	
SUBJECT: Name of Corporation	
DOCUMENT NUMBER: N20000008463	
The enclosed Statement of Change of Registe	ered Office/Agent and fee are submitted for filing.
Please return all correspondence concerning t	this matter to the following:
Stephen M. Cohen, Esq.	
Name of Contact Person Law Offices of Stephen M. Cohen, P.A.	
Firm/Company 11760 U.S. Highway One - Suite W504	
Address Palm Beach Gardens, FL 33408	
City/State and Zip Code stephen@smcohenlaw.com	n
E-mail address: (to be used for future ann	ual report notification)
For further information concerning this matte	er, please call;
Stephen M. Cohen	561 624-2201
Name of Contact Person	at (561) 624-2201 Area Code & Daytime Telephone Number
Enclosed is a \$35.00 check made payable to t	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

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1 ange is submitted for a corporation organized under the laws over the change its registered office or registered agent, or both, is	of the State of Florida		
	the corporation: Sweet Reads Florida, Inc. 4911 Bonsai Circle, Apt 105, Palm Beach Garder l office address:	is, FL 33418		
-	address (if different):	N20000008463		
5. The name and	rporation/qualification: Document num d street address of the current registered agent and registered o artment of State: (If resigned, enter resigned)			
	Stephen M. Cohen			
	4500 PGA Boulevard, Suite 104			
	Palm Beach Gardens, FL 33418 Palm Street address of the new registered agent (if changed) and /or registered office			
6. The name and (if changed):	d street address of the new registered agent (if changed) and /o	r registered office		
	Stephen M. Cohen			
	11760 U.S. Highway One - Suite W504	<u> </u>		
	P.O. Box. NOT acceptable Palm Beach Gardens, FL 33408			
The street address changed will	ress of its registered office and the street address of the busine I be identical.	ess office of its registered agent.		
Such change wauthorized by the	ras authorized by resolution duly adopted by its board of dire he board, or the corporation has been notified in writing of the	ctors or by an officer so ne change.		
	Stephen M. Cohen			
Signati	t the appointment as registered agent and agree to act in this	typed name and title		
I nerent accept I further agree of my duties, ar document is be corporation ha	t the appointment as registered agent and agree to act in this to comply with the provisions of all statutes relative to the p. and familiar with and accept the obligation of my position ing filed merely to reflect a change in the registered office as been notified in writing of this change.	capacity, capacity complete performance in as registered agent. Or, if this diress, I hereby confirm that the		
Sig	gnature of Registered Agent 4 Oct.	2021		
If signing on be	ehalf of an entity:			
Stephen M. Cohe	en			
	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 CR2E045 (04/13)