

NR2000004521

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

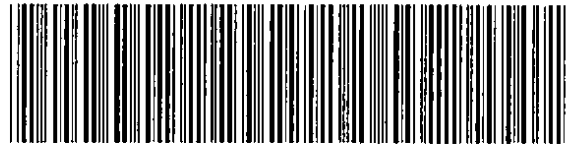
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TALLAHASSEE, FLORIDA

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Kommon Koz, Inc
Name of Corporation

DOCUMENT NUMBER: N22000004527

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:

Job Jacques

Name of Contact Person

Kommon Koz, Inc

Firm/Company

6424 North University Drive

Address

Tamarac, FL 33321

City/State and Zip Code

jjacques@kommonkoz.org

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Job Jacques

Name of Contact Person

at (954) 600-5351
Area Code & Daytime Telephone 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

**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 Florida in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Kommon Koz, Inc
2. The principal office address: 6424 North University Drive
Tamarac, FL 33321
3. The mailing address (if different): Same as Above
4. Date of incorporation/qualification: 05/10/2022 Document number: N22000004527
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)

CORPORATE CREATIONS NETWORK INC.

801 US HIGHWAY 1 NORTH PALM BEACH, FL 33408

No longer needed service Resigned

6. The name and street address of the new registered agent (if changed) and .or registered office (if changed):

Job Jacques

6424 North University Drive, Tamarac.

P.O. Box NOT acceptable

Tamarac, FL 33321

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DIVISION OF STATE
CORPORATIONS, FLORIDA

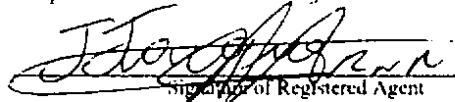
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

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

Job Jacques Director
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

07/10/2023

Date

If signing on behalf of an entity:

Job Jacques

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)