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Office Use Only



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COVER LETTER

TO: Amendment Section Division of Corporations	
SUBJECT: Scallop Republic Micronation, Inc. Name of Corporation	
DOCUMENT NUMBER: N23000002957	
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:	
Kristina Haselier	
Name of Contact Person	
Scallop Republic Micronation, Inc.	
Firm/Company	
4047 NW 13th Ave	
Address	
Gainesville, FL 32605	
City/State and Zip Code	
scalloprepublic@yahoo.com	
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
Kristina Haselier at / 863 \ 8993979	
Kristina Haselier at (863) 8993979 Name of Contact Person Area Code & Daytime Telephone 1	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

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

CR2E045 (04/13)

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	provisions of sections 607.0502, 617.050 nge is submitted for a corporation organ r to change its registered office or regist	nized under the laws of the State of <u>F</u>	lorida	his ——	_
	he corporation: Scallop Republic Microna	,			
	office address: 468 S Camillia Ave				_
	 	Coinavilla El 33605			
	ddress (if different): 4047 NW 13th Ave.		2057		
4. Date of incor	poration/qualification: 02/07/2023	Document number: N2300000	2937		
	I street address of the current registered a tment of State: (If resigned, enter resigne		h the		
	UNITED STATES CORPORATION AG	ENTS, INC.			
	476 RIVERSIDE AVE				
	JACKSONVILLE, FL 32202		SEC.	2024	
6. The name and (if changed):	I street address of the new registered age	nt (if changed) and /or registered offi	LE SHA	DEC -3	-
	Kristina Haselier		SSE	PH	
	4047 NW 13th Ave		E S	PH 4: 2	C
	РО Во	NOT acceptable		27	
	Gainesville, FL 32605				
The street addreas changed will	ess of its registered office and the street be identical.	address of the business office of its	register	red age	ent,
Such change wa authorized by the	as authorized by resolution duly adopted the board, or the corporation has been no	I by its board of directors or by an outfied in writing of the change.	officer s	0	
	200	Kristina Haselier, President of the B	Board		
Signature of an officer or director		Printed or typed name and title	ē		
l furthér agrée of my duties, an document is bei	the appointment as registered agent an to comply with the provisions of all stat d I am familiar with and accept the obl ng filed merely to reflect a change in th s been notified in writing of this change	utes relative to the proper and comp igation of my position as registered e registered office address, I hereby	plete per l'agent, y confiri	rforme Or, if n that	ance this the
	A CAC	8/31/2024			
Sig	nature of Registered Agent	Date			_
If signing on be	half of an entity:				
Kristina Haselier					
Т	yped or Printed Name				
	* * * FILING FI	EE: \$35.00 * * *			

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