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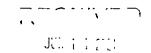
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2021 JUN 14 MM 11: 48
SECRETARY OF STATE
TALL AHASSES

COVER LETTER

SUBJECT: COCA HUNCAL, TAC.

Name of Corporation

DOCUMENT NUMBER: POCOCOLIZARY

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:

SEAN SUBJECT: COCA HUNCAL TAC.

Name of Contact Person

LOCA HUNCAL TAC.

Firm/Company

Address

City/State and Zlp Code

City/State and Zlp Code

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

For further information concerning this matter, please call:

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

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 TixiClL
in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: CCCCA FYMC(A1, InC.
2. The principal office address: 1816 W. KING STOCK
3. The mailing address (if different):
4. Date of incorporation/qualification: 1-13-2000 Document number: 1000000 4344
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)
Brice Nelvy, Jr.
1825 W. King Street
CCCCC, FZ 32926 = 55 \$
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
COIN VINCES
1825 W. King Street P.O.Box NOT acceptable
CCCCA, FZ 3292LG
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 hopored or the corporation has been notified in writing of the change.
Signature of an other or director Michelle Russell Secretor 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.
6/16/21
Significate of Registered Agent Date
If signing on behalf of an entity:
SCON SANGE Typed of Printed Name

* * * FILING FEE: \$35,00 * * *