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Special Instructions to Filing Officer.	

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## COVER LETTER

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TO: Amendment Section Division of Corporations

SUBJECT: 20/20 EVEGLASS SUPERSTORE, INC. Name of Corporation

## DOCUMENT NUMBER: P00000034973

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:

c/o W. Patrick Westerfield, Esq.
Name of Contact Person
Law Offices of Clint Curtis & Assocates, P.A.
Firm/Company
7217 East Colonial Dr. # 113
Address
Orlando, FL 32807
City/State and Zip Code
Law@ClintCurtis.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

W. Patrick Westerfield, Esq.	407	384-3120
Non-of Contrat Daman	_ at (	J. B. Darster Talaska Namkar
Name of Contact Person	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 <u>Street Address:</u> Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

CR2E045 (04/E3)

## 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.

I. The name of t	the corporation: 20/20 EYEGLASS SUPERSTORE, INC.
2. The principal	office address: 1555 SEMORAN BLVD., STE. 1221, WINTER PARK, FL 32792
3. The mailing a	address (if different):
4. Date of incorp	poration/qualification: 04/03/2000 Document number: 200000034973
	d street address of the current registered agent and registered office on file with the rtment of State: (If resigned, enter resigned)
	EDWARD UCCI
	784 ZOE CT
	OVIEDO, FL 32765
6. The name and (if changed):	d street address of the new registered agent (if changed) and /or registered office Law Offices of Clint Curtis & Assocates, P.A.
	7217 East Colonial Dr. # 113 P.O. Box NOT acceptable
	P.O. Box_NOT acceptable P.O. B
The street adare as changed still	$\frac{7}{100}$ ess of its registered office and the street address of the business office of its registered $\frac{1}{1000}$ ent.
Such change wa authorized by th	as authorized by resolution duly adopted by its board of directors or by an officer so $\frac{1}{100}$ board, or the corporation has been notified in writing of the change.
$\mathcal{A}$	Edward W. Ucci, President
	are of an officer or director Printed or typed name and title
I hdfeby accept I furthér agree i ôf my duties, an document is bei cornovation has	t the appointment as registered agent and agree to act in this capacity. to comply with the provisions of all statutes relative to the proper and complete performance ad I am familiar with and accept the obligation of my position as registered agent. Or, if this ing filed merely to reflect a change in the registered office address. Thereby confirm that the specen notified in writing of this change.

Signature of Registered Agend

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If signing on behalf of an entity:

W. Patrick Westerfield, Esq.

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