

P01000108714

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

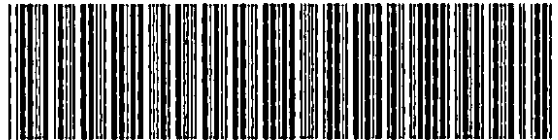
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



900354003749

10/26/20--01010--007 **35.00

FILED

2020 OCT 26 A 9 19
CLERK OF STATE
TALLAHASSEE, FLORIDA

RA
CH

10/30/20
DC

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Strong Link Data Corp.
Name of Corporation

DOCUMENT NUMBER: P01000108714

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:

Michael Mulcahy

Name of Contact Person

Strong Link Data Corp.

Firm/Company

PO Box 547475

Address

Orlando, FL 32854

City/State and Zip Code

michael.mulcahy@stronglinkdata.com

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

For further information concerning this matter, please call:

Michael Mulcahy

Name of Contact Person

at (407) 694-0463

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)