(Requestor's Name)
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PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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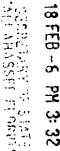
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## **COVER LETTER**

TO: Amendment Section Division of Corporations
SUBJECT: Bob's Bunz, Inc. Name of Corporation
DOCUMENT NUMBER: P02000070941
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:
Robert Spencer Name of Contact Person
Bob's Bunz, Inc.
P.O.Box 623 Address
Islamorada, FC 33036 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Robert Spencer at (305) 664-8363  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  Tallabassee, FL 32314  Street Address: Amendment Section  Division of Corporations  Clifton Building  2661 Executive Center Circle

Tallahassee, FL 32301

## 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 <b>FLOCH OA</b> in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: Bob's Bunz Inc.
2. The principal office address: 81620 Overseas Highway Islamorada,
FL 33036
3. The mailing address (if different): POBOX 623, Islamorada, FL 33036
4. Date of incorporation/qualification: June 27, 2002 Document number: P020000 70941
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)
GLORIAS TRAQUE - resigned
Mile Marker 81.6 20 Overseas Highuny
Islamorada, FC 33036
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Robert Spencer 3 3 3
81620 Overseas Hwy.
TS/a morada, FL 33036
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 anythicer or director Robert Spencer 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 CU123/2018 Date
If signing on behalf of an entity:
Typed or Printed Name

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

\* \* \* FILING FEE: \$35.00 \* \* \*