P02000129902

(Requestor's Name)					
(Address)					
(2)					
(Address)					
(Civ.(Civ.) (Ziv.(Div.) 4)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					

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2023 NOY | AMII: 1.9

RECEIVED

CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195					
REFERENCE : 101450 8332744					
AUTHORIZATION:					
COST LIMIT : \$ 35.00					
ORDER DATE : October 31, 2023					
ORDER TIME : 9:02 AM					
ORDER NO. : 101450-005					
CUSTOMER NO: 8332744					
CHANGE OF AGENT					
NAME: ANTHONY WILLIAM, INC.					
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:					
CERTIFIED COPY XX PLAIN STAMPED COPY					
CONTACT PERSON: Eyliena Baker EXT#					
EXAMINER:					

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

statement of cha	provisions of sections 607.0502, 617 inge is submitted for a corporation of ir to change its registered office or re	rganized under the law	vs of the State of $_$	FLORIDA	
1. The name of	the corporation: ANTHONY WILLIAM	1, INC.	J		
2 The principal	office address: 5379 LYONS RD #89	98			
	EEK, FL 33073				
3. The mailing a	ddress (if different):		••••••••••••••••••••••••••••••••••••••		
4. Date of incorp	poration/qualification: 12/10/2002	Document r	number: P020001	129902	
	I street address of the current register tment of State: (If resigned, enter res		d office on file wi	th the	
	File Florida Co.			2021 TAL	
	629 SW 1st Ave.			NOV	
· -	Fort Lauderdale	FL	33301	-1 p	
File Florida Co. 629 SW 1st Ave. Fort Lauderdale FL 33301 6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):					
Corporation Service Company					
	1201 Hays Street			_	
P.O Box NOT acceptable					
	Tallahassee	FL	32301		
The street address changed will	ess of its registered office and the st be identical.	reet address of the bus	siness office of its	s registered agent.	
Such change was	as authorized by resolution duly add ne board, or the corporation has been	opted by its board of d n notified in writing o	lirectors or by an of the change.	officer so	
Xie	2 aoni	Jill Cilmi, Vice F			
Stenatu	re of an officer or director		ed or typed name and til	Te .	
I further agree to of my duties, an document is bei corporation has	the appointment as registered agen to comply with the provisions of all d I am familiar with and accept the ng filed merely to reflect a change i been notified in writing of this cha n Service Company	statutes relative to the obligation of my posi in the registered office	this capacity. e proper and com ition as registered e address. I hereb	plete performance Lagent. Or, if this y confirm that the	
By: J	ne Cokubi	10/31/2023			
Sig	nature of Registered Agent		Date		
If signing on be	half of an entity:				
	Asst Vice President sped 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 * * *

CR2E045 (04/13)