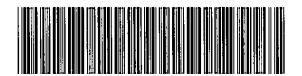
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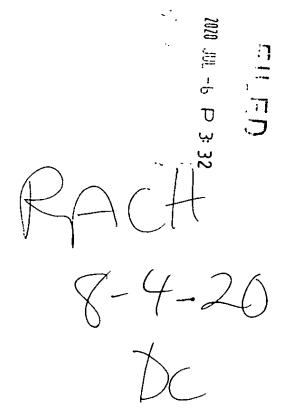
(Requestor's Name)			
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(Document Number)			
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FLORIDA DEPARTMENT OF STATE Division of Corporations

June 17, 2020

PATRICK THOMAS PO BOX 70 POMPANO BEACH, FL 33061

Ref. Number: P0300002407

We have received your document for and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing a computer printout which reflects the registered agent and registered office now on file with this office. Please amend your document accordingly.

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 220A00012016

Octavia L Simmons
Regulatory Specialist II Supervisor

www.sunbiz.org

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

statement of Cha	provisions of sections 607.0502, 617.05 inge is submitted for a corporation orga r to change its registered office or regis	mized under the laws of the State of $ar{oldsymbol{ol{oldsymbol{oldsymbol{ol{oldsymbol{ol{oldsymbol{ol{ol{ol{oldsymbol{ol{ol{ol}}}}}}}}}}} $	FLORIDA
	WAY TO GO HOLDING		
	the corporation:		
	office address: BY THE SEA, FL 33308		
2. The mailing a	PO BOX 70 POME	PANO BEACH, FL 33061	
 Date of incorp 	operation/qualification: PO BOX 70 POME 01/08/2003	Document number: P0300000)24()7
5. The name and	I street address of the current registered tment of State; (If resigned, enter resign	agent and registered office on file wi	
	RESIGNED PARK, A	lenry	-
	4411 N	E 27 TERRACE	_
	L, GHT Ha	E 27 FERRACE SE POINT FL 330	264
6. The name and (if changed):	I street address of the new registered ag	/	
	OLIVER SAUCY		-
	441 NE 2ND STREET		9
	P.O.B POMPANO BEAACH, FL 33060	lox NOT acceptable	τ ^τ . ງ . ω
The street addre	ess of its registered office and the stree be identical.	at address of the business office of it	2
Such change wa authorized by th	as authorized by resolution duly adopte ne board, or the corporation has been n	ed by its board of directors or by an officed in writing of the change.	officer so
1	> from	PATRICK THOMAS, PRESIDENT	Т
Signatu	re of an officer or director	Printed or typed name and to	tle
I hereby accept I further agree to of my duties, an document is bei corporation has	the appointment as registered agent a to comply with the provisions of all sta d I am familiar with and accept the ob ng filed merely to reflect a change in t been notified in writing of this chang	nd agree to act in this capacity. Hutes relative to the proper and con Higation of my position as registered the registered office address, I herel e.	iplete performance d agent. Or, if this by confirm that the
(1)	Le Saul	5/28/20	
Sign	nature of Begistered SceptWeW	Date	
If signing on be	half of an entity:		
PATRICK THON	MAS OLVER SAUCH		
T	wped or Printed Name New RAN		

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E645 (04/13)

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