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COVER LETTER

TO: Amendment Section Division of Corporations				
SUBJECT: GATER ENTERPRISES, Inc.				
Name of Corporation				
DOCUMENT NUMBER: P03000009556				
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:				
Gary G. Morrison				
Name of Contact Person				
GATER Enterprises, Inc.				
Firm/Company				
519 Saint Girons Court				
Address				
Punta Gorda, Florida 33950				
City/State and Zip Code				
garymorrison@comeast.net				
E-mail address: (to be used for future annual rep	port notification)			
For further information concerning this matter, please	se call:			
Gary Morrison	at (941)916-7536 Area Code & Daytime Telephone Number			
Name of Contact Person	Area Code & Daytime Telephone Number			
Enclosed is a \$35.00 check made payable to the Dep	partment 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)

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

statement of cha	ange is submitted for a corporation	17.0502, 607.1508, or 617.1508, Florida Statutes, this organized under the laws of the State of <mark>Florida</mark> registered agent, or both, in the State of Florida.	
1. The name of	the corporation: GATER Enterprises	s, Inc.	
2. The principal Punta Gorda, Flo	office address: 519 Saint Girons Co.	urt,	
3. The mailing a	address (if different): Same		
	poration/qualification: 01/17/2003	Document number: P0300009556	
5. The name and		ered agent and registered office on file with the	
	CAMPBELL, J DAVID EA		
	405 TAMIAMI TRAIL		
	PUNTA GORDA, FL 33950		
6. The name and (if changed):	d street address of the new registere	ed agent (if changed) and /or registered office	C 2207
	Gary G, Morrison		AN
	519 Saint Girons Court	.	ယ်
	Punta Gorda, Florida 33950	P.O. Box NOF acceptable	AM II:
The street addre	ess of its registered office and the electrical.	street address of the business office of its registered agent, Ty	3
Such change wa authorized by th	as authorized by resolution duly ache board or the corporation has be	dopted by its board of directors or by an officer so een notified in writing of the change.	
Day	5/Marin	Gary G. Morrison, President	
	ire of an officer or director	Printed or typed name and title	
I hereby accept I further agree of my duties, an document is bei corporation has	the appointment as registered age to comply with the provisions of a d l am familiar with and accept thing filed merely to reflect a change s heen notified in writing of this ch	ent and agree to act in this capacity. Il statutes relative to the proper and complete performance he obligation of my position as registered agent. Or, if this e in the registered office address, I hereby confirm that the hange.	
Jan	D//lon	January 2, 2022	
, <u> </u>	nature of Registered Agent	Date	
If signing on be	chalf of an entity:		

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

Typed or Printed Name