## PO4000127292

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## **COVER LETTER**

TO:

Amendment Section Division of Corporations

SUBJECT: ANKYS CONSULTING INC. Name of Corporation

DOCUMENT NUMBER: Po 4000122292

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:

JOE ANKUS

Name of Contact Person

ANICOS LONSULTING ING.

Firm/Company
12555 ORANGE OR. #4207

Address

PAVIE, FLO. 33330
City/State and Zip Code

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

For further information concerning this matter, please call:

JOE ANKUS

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

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-E3)

## 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 FLORIDA in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation:  ANK-S CONSULTING; INC.  2. The principal office address: 12555 URANGE DRIVE # 4207  OAVIE, FL. 33334
3. The mailing address (if different):
4. Date of incorporation/qualification: 8/23/04 Document number: Po4000122 292
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)  Toe ANK VS
12555 UNANGE DR. H4207
DAVIE FLORIOD 33334
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):    TONATHAN DRICKER   ESQ.
A 4
The street address of its registered office and the street address of the business office of its registered agent.
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.
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.  To E ANLYS MASINE NT
Signature of an officer or director  To E ANE S I Resige NT 1: F
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 bying 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.
Michigary of Registered Agent  6-20-22  Date  Date
If signing on behalf of an entity:
Jonathan Drocker
Typed or Printed Name

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (04/13)