(Re	equestor's Name)			
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COVER LETTER

TO:	Amendment Section Division of Corporations	
SUBJ Name	ECT: PUT GOD 1ST INVESTMENT, INC. of Corporation	
DOC	UMENT NUMBER: P04000145399	
The e	nclosed Statement of Change of Registered	d Office/Agent and fee are submitted for filing.
Please	e return all correspondence concerning this	s matter to the following:
Sarah	n Clasby Engel, Esq.	
Name	of Contact Person	·
The E	Engel Firm	
Firm/	Company	
2665	S. Bayshore Drive, Suite 440	
Addre	ess	
Coco	nut Gove, FL 33133	
City/S	State and Zip Code	
	sarah@engel-firm.com	
E-ma	ail address: (to be used for future annua	l report notification)
For fu	urther information concerning this matter,	please call:
Sarat	n Engel	at (786)235 8419 Area Code & Daytime Telephone Number
	Name of Contact Person	Area Code & Daytime Telephone Number
Enclo	osed is a \$35.00 check made payable to the	Department of State.
	Mailing Address:	Street Address:
	Mailing Address: Amendment Section	Amendment Section
	Division of Corporations	Division of Corporations
	P.O. Box 6327 The Centre of Tallahassee	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

CR2E045 (04/13)

Tallahassee, FL 32314

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

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508. Florida Statutes, thi. mge is submitted for a corporation organized under the laws of the State of Flotida or to change its registered office or registered agent, or both, in the State of Florida.	<u></u>			
	the corporation: Put God 1st Investment, Inc.				
	office address: 919 4th Street FL 33139	_	-		
3. The mailing a	address (if different):		<u>. </u>		
4. Date of incorporation/qualification: 10/21/2004 Document number: P04000145399					
	d street address of the current registered agent and registered office on file with the ettment of State: (If resigned, enter resigned)				
	Steven Rosen, Esq.				
	400 South Pointe Drive, Suite 311	202	بر الم در الم		
	Miami Beach, FL 33139	2020 HAY	20		
6. The name and (if changed):	d street address of the new registered agent (if changed) and /or registered office Sarah Clasby Engel, Esq.	-4 PM			
		5: 10			
2665 S. Bayshore Drive, Suite 440 P.O. Box NOT acceptable					
	Coconut Grove, FL 33133				
The street address changed will	ess of its registered office and the street address of the business office of its registered be identical.	l agent	•		
Such change wa authorized by th	as authorized by resolution duly adopted by its board of directors or by an officer so he board, or the corporation has been notified in writing of the change.				
	Theodore R Lucas				
I hereby accept I further agree to of my duties, and document is bei corporation has	the appointment as registered agent and agree to act in this capacity. To comply with the provisions of all statutes relative to the proper and complete perform I am familiar with and accept the obligation of my position as registered agent. (In a filed merely to reflect a change in the registered office address, I hereby confirm to be a notified in writing of this change.	rmanc r, if thi that the	e S		
Sig	nature of Registered Agent Date				
If signing on be	half of an entity: OCS by Engl				

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)