

P05000039405

(Requestor's Name)

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(City/State/Zip/Phone #)

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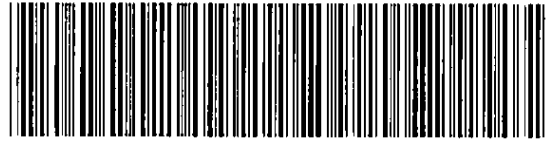
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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Zutana Holding INC
Name of Corporation

DOCUMENT NUMBER: P05000039405

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:

JASmina Ehab
Name of Contact Person

Zutana Holding INC
Firm/Company

3091 SW 210 AVE DUNNELLON 2
Address

Dunnellon, FL 34431
City/State and Zip Code

hoba7@hotmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Ehab Abdallah at (516) 5815134
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

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: Zutona Holding INC
2. The principal office address: 3091 SW 210 AVE DUNNELLON, FL 34431
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 3/15/2005 Document number: PO5000039405
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)

Adel Hassan /
3091 SW 210 AVE DUNNELLON 34431
Previous Address 2605 SW 39 AVE OCALA FL 34474

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Eheb Abdallah /
3091 SW 210 AVE DUNNELLON, FL 34431
P.O. Box NOT acceptable
PREVIOUS ADDRESS 2105 SW 39 AVE OCALA FL 34474

The street address of its registered office and the street address of the business office of its registered agent, 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.

Adel Hassan
Signature of an officer or director

Adel Hassan
Printed or typed name and title

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 being 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.

Eheb Abdallah
Signature of Registered Agent

11/1/2024
Date

If signing on behalf of an entity:

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)