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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : CORPORATE CREATIONS INTERNATIONAL INC.

Account Number : 110432003053 Phone : (561)694-8107 Fax Number : (561)214-8442

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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REGISTERED AGENT CHANGE GREEN EARTH ENVIRONMENTAL INC.

Certificate of Status	0
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S. PRATHER

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

A Malan	-an in submitted for a cornoration organ	12, 607.1508, or 617.1508, Florida Statutes, this nized under the laws of the State of Florida ered agent, or both, in the State of Florida.			
In order	the corporation: GREEN EARTH ENVIR	ONMENTAL INC.			
1. The name of t	the corporation:	A-LOCKA, FL 33054			
2. The principal	office address: 14011 NW 20th Ave. OP				
3. The mailing a	address (if different):				
4. Date of incoη	poration/qualification: 03/17/2005	Document number: P03000041084			
5. The name and	d street address of the current registered a rtment of State: (If resigned, enter resign	agent and registered office on file with the			
	Ashley Goldsmith				
	801 US Highway I				
	North Palm Beach, FL 33408	ent (if changed) and /or registered office			
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed): Corporate Creations Network Inc.					
			P.O. Box NOT acceptable 43 6		
				North Palm Beach, FL 33408	
The street addr as changed wil	ess of its registered office and the stree I be identical.	t address of the business office of its registered agent,			
Such change w authorized by t	as authorized by resolution duly adopte the board, or the corporation has been n	ed by its board of directors or by an officer so otified in writing of the change.			
	71/l	Carlos M Alvarez, Attorney-in-Fact			
	are pl an officer or director	Printed or typed name and title			
I further agree of my duties, at	t the appointment as registered agent a to comply with the provisions of all sta nd I am familiar with and accept the ob sing filed merely to reflect a change in t as beginnotified in writing of this change	ligation of my position as registered agent. Or, if this he registered office address, I hereby confirm that the			
	71/1/	07/23/2021			
Si	gneture of Regimered Agent	Date			
If signing on b	chalf of an entity:				
	ez, Attorney-in-Fact				
	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)