P05000139872

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne) .
(Do	ocument Number)	
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DIVISION OF CORPORATIONS

COVER LETTER

Amendment Section

TO:

Division of Corporations
SUBJECT: READY OPS INC (Name of Corporation)
DOCUMENT NUMBER: P05000139872
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:
Name of Contact Person)
READYOPS TNC (Firm/Company)
PORT Saint Lucie, FC 34953 (City/State and Zip Code)
For further information concerning this matter, please call:
TAVLOS STEVENSON at (467) 416-3457 (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 Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

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 Status statement of change is submitted for a corporation organized under the laws of the State of in order to change its registered office or registered agent, or both, in the State of Florida.	orida
1. The name of the corporation: READYOPS INC.	.,
2. The principal office address: 221 South West Yogen Place PORT Salat Lucic, FL. 34953	
3. The mailing address (if different):	
4. Date of incorporation/qualification: 16-13-2605 Document number: P0500	× 139872
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:	>
TANLOS STEVENSON	
3802 JONATHANS WAY	0
Boynton BEACH, FL. 33436	9 JU
2040100 CERCA, (C. 33436	
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):	RY OF S
PORT Saint: Lucio FE. 34953	ATIONS 32
The street address of its registered office and the street address of the business office of its reg as changed will be identical.	istered agent,
Such change was authorized by resolution duly adopted by its board of directors or by an office authorized by the board, or the corporation has been notified in writing of the change.	cer so
ChaisTophon S. DAnge (Printed or typed name and type)	10, President
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 of my duties, and I am familiar with and accept the obligation of my position as registered age document is being filed merely to reflect a change in the registered office address, I hereby co corporation has been notified in writing of this change.	e performance ent. Or, if this onfirm that the
NO CHANGE TO NAME	
(Signature of Registered Agent) (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 (8/05)