P06000146005

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SECRETARY OF STATE

1. Lewis

COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: Keena Wealth, Inc.

Name of Corporation

NOCUMENT NUMBER: P0600146005

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:

Tony S. Keena

Name of Contact Person

Keena Wealth, Inc.

Firm/Company

941 West Morse Blvd., Suite 100

Address

Winter Park, FL 32789

City/State and Zip Code

Tony@KeenaWealth.com

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

For further information concerning this matter, please call:

Tony S. Keena

_.407 \618-643

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
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, statement of change is submitted for a corporation organize		is
in order to change its registered office or registere		
1. The name of the corporation: Keena Wealth, Inc.		
2. The principal office address: 941 West Morse Bo	ulevard, Suite 100	
Winter Park, FL 327		
3. The mailing address (if different): P.O. Box 1599		
Witnter Park, FL	0.000	
4. Date of incorporation/qualification: 11/21/2006	Document number: P0600146005	
5. The name and street address of the current registered age Florida Department of State: (If resigned, enter resigned)	ent and registered office on file with the	
Tony S. Keena		
305 Douglas Avenue		
Altamonte Springs, FL 32714		SEANO SIANO
6. The name and street address of the new registered agent ((if changed):	(if changed) and /or registered office	SEGRETARY VISION OF CO
Tony S. Keena		
941 West Morse Boulevard, St	uite 100	SIAIE RATION
P.O. Box NOT acc	ceptable	₩ %
Winter Park, FL 32789		
The street address of its registered office and the street adas changed will be identical.	dress of the business office of its registered	i agent,
Such change was authorized by resolution duly adopted by authorized by the board, or the corporation has been notified.	y its board of directors or by an officer so led in writing of the change.	
Signature of an officer or effector	Printed or typed name and title	Bus
I hereby accept the appointment as registered agent and a I further agree to comply with the provisions of all statute performance of my duties, and I am familiar with and accagent. Or, if this document is being filed merely to reflect hereby confirm that the corporation has been notified in w	igree to act in this capacity. is relative to the proper and complete ept the obligation of my position as registe a change in the registered office address, vriting of this change.	red I
Signature of Registered Agent	11/13/14	
•	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 (03/12)