P06000148465

(Requestor's Name)				
(Ad	dress)			
	dress)			
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(Cit	:y/State/Zip/Phone #))		
PICK-UP	☐ WAIT	MAIL		
(Bu	siness Entity Name)			
(00	siness Entry Name,			
(Do	cument Number)			
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SECRETARY OF STATE

R.A. TB 6/9/09

COVER LETTER

TO:	Amendment Section Division of Corporation	ns			
SUBJ	ЕСТ:	701 Baysho	ore Corp		
DOC	UMENT NUMBER:	P06	000148465		
The e	nclosed Statement of Cha	ange of Registered Offic	e/Agent and fee are subn	nitted for filing.	
Please	return all corresponden	ce concerning this matte	r to the following:		
			Soltani ntact Person		
		Name of Co	maci Person		
701 Bayshore Corp					
		Firm/C	ompany		
		1714 County R	td One Suite 19		
			iress		
	Dunedin, FL 34698 City/State and Zip Code				
	٧٠	ah3876@	men com		
	E-mail ad	ab3876@ dress: (to be used for t	future annual report no	tification)	
			•	ŕ	
For fu	rther information concer	ning this matter, please	call:	<u>.</u>	
•	Alex So	ltani	at (949)	929-3189	
	Name of Conta	ct Person	Area Code & Day	time Telephone Number	
Enclo	sed is a \$35.00 check ma	de payable to the Depar	tment of State.		
	Amer Divis P.O. I	ng Address: adment Section ion of Corporations Box 6327 hassee, FL 32314		Section Corporations ling ive Center Circle	
			Tallahassee,	FL 32301	

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

statement of ch	ange is submitted for a corporation	617.0502, 607.1508, or 617.1508, Flor on organized under the laws of the State	of Florida
		or registered agent, or both, in the State	of Florida.
	the corporation: 701 Baysho		
2. The principal	office address: 1714 County	Rd One Suite 19	
Dunedin,	FL 34698		
3. The mailing	address (if different):		
4. Date of incor	poration/qualification: 11/30	0/2006 Document number:	P06000148465
	d street address of the current regirtment of State: (If resigned, enter	istered agent and registered office on filer resigned)	e with the
	Alex Soltani		-1 2 2
	522 Alternate 19		2009 JUN SECRET
	Palm Harbor, FL 34683		HASSEE, OF
6. The name and (if changed):	d street address of the new registe	red agent (if changed) and /or registered	PH 1: 1:3
	Alex Soltani		5
	1714 County Rd One Suit	te 19	12*
		D. Box NOT acceptable	
	Dunedin, FL 34698		
The street address changed will	ess of its registered office and the be identical.	e street address of the business office	of its registered agent,
Such change was authorized by the	as authorized by resolution duly ne board, or the corporation has	adopted by its board of directors or been notified in writing of the change	y an officer so
Bignati	te of an officer or director	Alex Soltani,	Director and title
I hereby accept I further agree of of my duties, an document is bei corporation has	the appointment as registered a to comply with the provisions of ad I am familiar with and accept ng filed merely to reflect a chan s been notified in writing of this	gent and agree to act in this capacity, all statutes relative to the proper and the obligation of my position as regis ge in the registered office address, I h change.	complete performance tered agent. Or, if this ereby confirm that the
K		05/21/20	09
Sig	nature of Registered Agent	Date	
If signing on be	half of an entity:		
T	yped or Printed Name	_	

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (8/05)

* * * FILING FEE: \$35.00 * * *