

P07000055222

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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MAIL

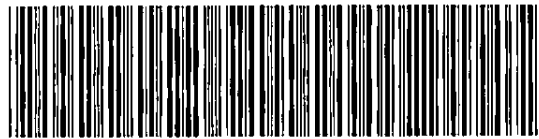
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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MAY 26 2023

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## COVER LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: Frank Lullo Insurance Inc.  
Name of Corporation

DOCUMENT NUMBER: P07000055222

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:

Frank Lullo

Name of Contact Person

Frank Lullo Insurance Inc.

Firm/Company

12961 N. Main St. #304

Address

Jacksonville, FL 32218

City/State and Zip Code

Lullofrank@gmail.com

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

For further information concerning this matter, please call:

Frank Lullo

Name of Contact Person

at 904 415-5500

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: Frank Lillo Insurance Inc.
2. The principal office address: 12961 N. Main St. #304, Jacksonville, FL 32218
3. The mailing address (if different): 5 Pirates Lane #11, Gloucester, MA 01930
4. Date of incorporation/qualification: 5/8/2007 Document number: P07000055222
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)

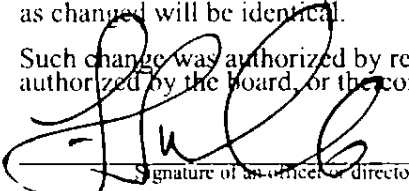
Frank Lillo  
1146 Beach Walker Rd.  
Fernandine Bch., FL 32034

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

Same  
12961 N. Main St #304  
Jacksonville, FL 32218

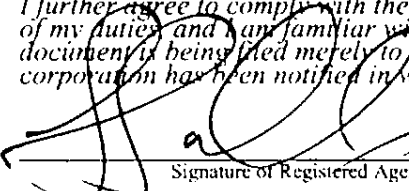
The street address of its registered office and the street address of the business office of its registered agent, if changed, will be identical.

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.

  
Signature of an officer or director

Frank Lillo (President)  
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 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.

  
Signature of Registered Agent

2/27/23  
Date

If signing on behalf of an entity:

Frank Lillo  
Typed or Printed Name

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