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COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: Amy Harvey, Inc.

Name of Corporation

DOCUMENT NUMBER.

P07000065867

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:

Amy Harvey

Name of Contact Person

Amy Harvey, Inc

Firm/Company

8107 Pensacola Blvd. Suite A

Address

Pensacola, FL 32534

City/State and Zip Code

amy@amyharvey.com

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

For further information concerning this matter, please call:

Amy Harvey

୍,850 ୍,572-8466

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

statement of cha	nge is submitted for a corporation	617.0502, 607.1508, or 617.150 on organized under the laws of th or registered agent, or both, in th	ne State of FLORIDA
1. The name of t	he corporation: AMY HARV	EY INC	
2. The principal	office address: 8107 PENSA		
	PENSACOL	A, FL 32534	
3. The mailing a	ddress (if different):		
4. Date of incorp	poration/qualification: 06/04/2	2007 Document number	P07000065867
	street address of the current reg tinent of State: (If resigned, ente	gistered agent and registered officer resigned)	e on file with the
	RESIGNED		
6. The name and (if changed):	Ç.	ered agent (if changed) and /or re	gisteral office
	8107 PENSACOLA BL	.VD. SUITE A	THE TO THE STATE OF THE STATE O
		. Box NOT acceptable	—————————————————————————————————————
The street addre as changed will	ss of its registered office and the identical.	ne street address of the business	office of its registered agent,
Such change wa authorized by th	s authorized by resolution duly e board, or the corporation has	adopted by its board of director been notified in writing of the c	s or by an officer so hange.
	Tawul re of an officer or precepting	Amy Harvey, Pro	esident d name and title
l further agree t performance of agent. Or \if thi	o comply with the provisions of my duties and I am familiar wit s document is being filed merel	ngent and agree to act in this cap fall statutes relative to the prop th and accept the obligation of i y to reflect a change in the regis otified in writing of this change.	er and complete ny position as registered siered office address. I
_ Clius	Hawai	04/10/2018	
If signing on bel	nature of Registered Agent nalf of an entity:	Da	ale.
Ту	ped or Printed Name	_	

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