Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H22000215670 3)))



H220002156703ABCZ

**Note:** DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : REGISTERED AGENT SOLUTIONS INC

Account Number : I20100000062 Phone : (888)705-7274 Fax Number : (888)706-7274

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email	Address:			
CMGTT	muuress.			

2022 JUN 22 PM 4: 54

## REGISTERED AGENT CHANGE CHUCK FISCHER STUDIO, INC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$35.00

A. RAMSEY JUN 23 2022

## **COVER LETTER**

TO: Amendment Section Division of Corporations

15129570210

SUBJECT: CHUCK FISCHER S	STUDIO, INC.
Name of Corporation	
DOCUMENT NUMBER: P070001300	061
The enclosed Statement of Change of Registered Off	ice/Agent and fee are submitted for filing.
Please return all correspondence concerning this matter	ter to the following:
Joshua Murphy	
Name of Contact Person	
Registered Agent Solutions, Inc.	
Firm/Company	
Corporate Center One, 5301 Southwest Pkwy, Ste 400	
Address	······································
Austin, Texas 78735	
City/State and Zip Code	<del></del>
E-mail address: (to be used for future annual rep	ort notification)
For further information concerning this matter, please	e call:
Joshua Murphy	at (888 ) 705-7274  Area Code & Daytime Telephone Number
Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a \$35.00 check made payable to the Depa	artment of State.
Mailing Address:	Street Address:
Amendment Section Division of Corporations	Amendment Section
Division of Corporations	Division of Corporations

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

CR2E045 (04/13)

P.O. Box 6327

Tallahassee, FL 32314

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

statement of cha	provisions of sections 607,0502, 6. inge is submitted for a corporation ir to change its registered office or	organized	under the lav	ws of the State of	Florida
1. The name of	the corporation: CHUCK FISC	HER ST	TUDIO, IN	IC.	
	office address: 518 Waterfor				88-1082
3. The mailing a	address (if different):			<u>_</u> .	
4. Date of incorp	poration/qualification: 12/7/200	)7	_ Document	number: P0700	00130061
5. The name and	d street address of the current regis rtment of State: (If resigned, enter	tered agent			
	BLUMBERGEXCELSIOR (	CORPOR	ATE SER	VICES, INC.	
	155 OFFICE PLAZA DR		1ST F	FLOOR	_
	TALLAHASSEE		FL	32301	_
6. The name and (if changed):	d street address of the new registere Registered Agent Sol			d /or registered o	office Plant July 22 P
	155 Office Plaza Dr.		Suite A		177
	Tallahassee	P.O. Box NOT	3230	1	22
-	ess of its registered office and the be identical. as authorized by resolution duly a the board, or the corporation has b				
/s/ Ronal	d Milano	Ro	nald Milar		Authorized Person
corporation nas	the appointment as registered ag to comply with the provisions of a ad I am familiar with and accept to ing filed merely to reflect a chang is been notified in writing of this co	nange.	ree to act in relative to th on of my pos vistered offic		
Signature of Registered Agent			6/22/2022	Date Date	
_	half of an entity:				
	Assistant Secretary				
	yped or Printed Name				
	* * * £11 13	ere.	25 00 * * *		

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 (04/13)