

PO# 000003227

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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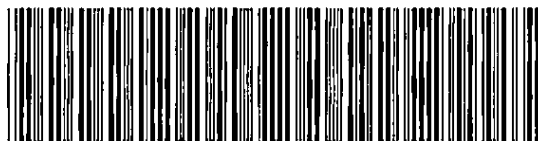
(Business Entity Name)

(Document Number)

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JUL 31 2024

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SCOTT M. BENDER, ESQUIRE
ATTORNEY AT LAW

1401 N. UNIVERSITY DRIVE, SUITE 607
CORAL SPRINGS, FL 33071-8910

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Via Fedex 817649467500

July 29, 2024

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Re: My Client : Andy's Plaza, Inc.
Document # : P08000003227
Matter : Statement of Change of Registered Office AND Registered Agent
or Both

Dear Sir / Madam:

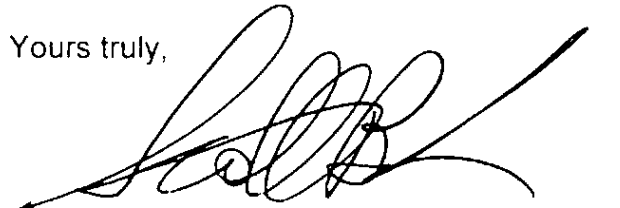
Enclosed please find a Cover Letter as well as a Statement of Change of Registered Office or Registered Agent Or Both. I am the new registered agent for the above named entity and my address is new as well.

Also enclosed is my office check # 1040 in the amount of \$35.00 for the filing fee made payable to the Department of State.

Please file the foregoing as soon as possible.

If you have any questions whatsoever please do not hesitate to contact my office. Thank you for your anticipated courtesy and cooperation.

Yours truly,



Scott M. Bender, Esq.
SMB/ah
encl: as noted

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PM 4:59
TALLAHASSEE, FL

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Andy's Plaza, Inc.
Name of Corporation

DOCUMENT NUMBER: P08000003227

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:

Sophia Tsanos

Name of Contact Person

Andy's Plaza, Inc.

Firm/Company

434 E. 10 Street, Apt. 1

Address

New York, NY 10009

City/State and Zip Code

SMBESQ@GMAIL.COM

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

For further information concerning this matter, please call:

Sophia Tsanos

at (212) 598-4125

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
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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**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: Andy's Plaza, Inc.
2. The principal office address: 434 E. 10 Street, Apt. 1, New York, NY 10009
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 1/10/08 Document number: P08000003227
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)

Sophia Tsanos

650 West Ave., Apt. 1903

Miami Beach, FL 33139

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

Scott M. Bender, Esq.

1401 N. University Drive, Suite 607

P.O. Box NOT acceptable

Coral Springs, FL 33071

The street address of its registered office and the street address of the business office of its registered agent, as 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.

Sophia Tsanos, Pres.
Signature of an officer or director

Sophia Tsanos

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 I 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]
Signature of Registered Agent

7/26/24

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 (04/13)

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