## P08000098775

| (Requestor's Name)                      |  |  |  |
|---|--|--|--|
| ( 15-42-51-1 5                          |  |  |  |
| (Address)                               |  |  |  |
|   |  |  |  |
| (Address)                               |  |  |  |
|   |  |  |  |
| (City/State/Zip/Phone #)                |  |  |  |
| PICK-UP WAIT MAIL                       |  |  |  |
|   |  |  |  |
| (Business Entity Name)                  |  |  |  |
| ·                                       |  |  |  |
| (Document Number)                       |  |  |  |
| Certified Copies Certificates of Status |  |  |  |
|   |  |  |  |
| Special Instructions to Filing Officer: |  |  |  |
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Office Use Only



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SECRETARY OF STATE
TALL AHASSEE, FLORIDA

RA. CLAR C.COULLIETTE MAR 25 2009 EXAMINER

## **COVER LETTER**

| TO: Amendme<br>Division | ent Section<br>of Corporations  |  |
|-------------------------|---|--|
| SUBJECT:                | FORE EAST INC (Name of Corp.  | poration)  |
| DOCUMENT N              | umber: <u>P.O.</u> 8000098  | 775  |
| The enclosed Stat       | ement of Change of Registered Office/A  | Agent and fee are submitted for filing.  |
| Please return all c     | orrespondence concerning this matter to   | the following:   |
|                         | JOSHUA DENNIS<br>(Name of Conta   | TAGACIC Person)  |
|                         | FORE EAST (Firm/Com   | Twe pany)  |
|                         | S800 Nw<br>(Addres  | 2 NU AVE   |
|                         | BOCA RATON  | 7. 33487   |
| D 6 4 1 6               | (3.3, 2.2.0   |  |
|                         | nation concerning this matter, please cal   | •  |
| Josmun (N               | ame of Contact Person)  | at (561) 239-9637<br>(Area Code & Daytime Telephone Number)  |
| Enclosed is a \$35      | .00 check made payable to the Departme  | ent 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

| Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes statement of change is submitted for a corporation organized under the laws of the State of   | ORINA_   |
|--|--|
| 1. The name of the corporation: FORE EAST INC  2. The principal office address: S800 NW QWD AVE, BOCH RM   |  |
|  | 1010 FL 334                                      |
| 3. The mailing address (if different):   |  |
| 4. Date of incorporation/qualification: Document number: Po 800  | 00098775   |
| 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)   |  |
| 20909 Boca Rioge Cir   |  |
| BOCA RATON FL 33428 50   |  |
|  | SEC 99   |
| A A A A A A A A A A A A A A A A A A A  | O9 HAR   |
| 6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):  | 23   |
| S800 NW DNO HVE  | رة الله الله الله الله الله الله الله الل        |
| BOCA RATOD FL 33487 (P.O. BOX NOT acceptable)  | <b>34</b>  |
| (r.o. not not accepanc)  |  |
| The street address of its registered office and the street address of the business office of its registas changed will be identical.   | stered agent,                                    |
| Such change was authorized by resolution duly adopted by its board of directors or by an office authorized by the board, or the corporation has been notified in writing of the change.  | er so  |
| (Signature of an officer of director)  To shup Den 25 T  (Printed or typed name and title)   | TARACK   |
|  |  |
| 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 of my duties, and I am familiar with and accept the obligation of my position as registered agent document is being filed merely to reflect a change in the registered office address, I hereby concorporation has been notified in writing of this change. | performance<br>nt. Or, if this<br>ufirm that the |
| 3/20/20  | 09   |
| (Signature of Registered Agent) (Date)   | <del></del>                                      |
| If signing on behalf of an entity:   |  |
| TOSHUA DENNIS TABACK (Typed or Printed Name)   |  |

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