## P08000105518

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## . COVER LETTER

TO:	Amendment Section Division of Corporations	
SUBJE Name o	CT: One Percent More, Inc. f Corporation	
DOCU	MENT NUMBER: P08000105518	
The enc	dosed Statement of Change of Registere	d Office/Agent and fee are submitted for filing.
Please r	eturn all correspondence concerning this	s matter to the following:
Steffan	Bradford	
Name o	f Contact Person	
Incorpor	rating Services, Ltd.	
Firm/Co	ompany	<del></del>
3500 So	outh DuPont Highway	
Address	8	
Dover/F	DE 19901	
City/Sta	ite and Zip Code	<del></del>
	radiv(a)ineserv.com	
E-mail	address: (to be used for future annua	d report notification)
For furt	her information concerning this matter.	please call:
Steffan	Bradford	302 \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
	Name of Contact Person	at ( 302 ) 531-0855 Area Code & Daytime Telephone Number
Enclose	ed is a \$35.00 check made payable to the	Department of State.
	Mailing Address: Amendment Section	Street Address:
	Amendment Section Division of Corporations	Amendment Section
	P.O. Box 6327	Division of Corporations The Centre of Tallahassee
	Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810
	The second secon	Tallahassee, FL 32303

CR213045 (04713)

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

statement of cha	inge is submitted for a corporation	l 7,0502, 607,1508, or 617,1508, Florida 8 organized under the laws of the State of $\frac{V}{T}$ registered agent, or both, in the State of Fi	lorida	his ————	<u>-</u>
L. The name of	the corporation: One Percent More.	Inc.			
	office address; 3030 N Rocky Point				_
3. The mailing a	ddress (if different): 6102 Glenwoo	od Drive, huntington beach, CA 92647			
		Document number: P0800010	5518		
	I street address of the current regist tment of State: (If resigned, enter r	tered agent and registered office on file wit resigned)	th the		
	NORTHWEST REGISTERED AG	ENT LLC.			
	7901 4TH STREET N. SUITE 300			2022	
	ST.PETERSBURG, FL 33702			AUG 2	
6. The name and street address of the new regi (if changed):		ed agent (if changed) and /or registered offi	ice	2022 AUG 22 PH 12: 4	
	Incorporating Services, Ltd.			<u> ۲</u> :2	
	1540 Glenway Drive		स्मां		
	Tallahassee, FL 32301	P.O. Box. NOT acceptable			
The street addreas changed will	ess of its registered office and the be identical.	street address of the business office of its	s register	red age	nt,
Such change wa authorized by th	ns authorized by resolution duly a ne board, or the corporation has be	dopted by its board of directors or by an open notified in writing of the change.	officer s	O	
~	Malloch	Eric Malloch, Owner	r	. · · · · · · · · · · · · · · · · · · ·	_
I hereby accept I further agree of my duties, an document is bei	the appointment as registered ag to comply with the provisions of a d I am familiar with and accept th ng filed merely to reflect a chang s been notified in writing of this cl	Printed or typed name and fill ent and agree to act in this capacity, all statutes relative to the proper and com- he obligation of my position as registered e in the registered office address, I hereb hange.		rforma Or, if i n that i	nce his the
SHL	L RAW				
Sig	nature of Registered Agent	Date			-
If signing on be	half of an entity:				
. T	yped or Printed Name				
	* * * FILIN	NG 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)