PD9000035080

| (Re | questor's Name) | |
|---|--------------------|-------------|
| (Ad | dress) | |
| (Ad | dress) | |
| (Cit | ry/State/Zip/Phone | e #) |
| PICK-UP | ☐ WAIT | MAIL |
| (Bu | siness Entity Nar | me) |
| (Do | ocument Number) | |
| Certified Copies | _ Certificates | s of Status |
| Special Instructions to Filing Officer: | | |
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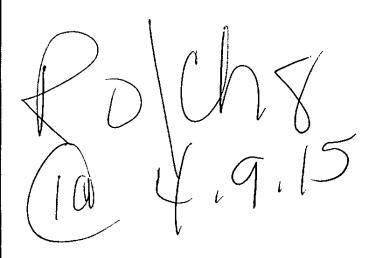




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COVER LETTER

TO: Amendment Section

Division of Corporations

SUBJECT: Marina Hermann, PA

Name of Corporation

DOCUMENT NUMBER, P09000035080

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:

Marina Hermann

Name of Contact Person

Marina Hermann, PA

Firm/Company

P.O. Box 7172

Address

Naples, FL 34101

City/State and Zip Code

marinafloridausa@gmail.com

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

For further information concerning this matter, please call:

Marina Hermann

,,239

745-8003

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

| | • | 7.0502, 607.1508, or 617.1508, Florida Statutes, this organized under the laws of the State of Florida | |
|---------------------------------|---|---|-------------|
| | • | registered agent, or both, in the State of Florida. | |
| 1. The name of | the corporation: Marina Herma | ann, PA | |
| 2. The principal | office address: 451 Bayfront | Place #5504, Naples, FL 34102 | |
| | | | |
| 3. The mailing a | address (if different): P.O. Box | 7172, Naples, FL 34101 | |
| 4. Date of incor | poration/qualification: 04/20/20 | Document number: P0900035080 | |
| 5. The name and | | ered agent and registered office on file with the | |
| | Marina Hermann | | |
| | 1415 Panther Ln, Suite | 121 | ξ. |
| | Naples, FL 34109 | | CALL OF |
| 6. The name and (if changed): | d street address of the new registere | d agent (if changed) and /or registered office | K COHPUT |
| | Marina Hermann | | 8 |
| | 451 Bayfront Place #550 |)4 | (10 |
| | P.O. Bo Naples, FL 34102 | NOT acceptable | |
| | | | |
| The street address changed will | ess of its registered office and the solution be identical. | street address of the business office of its registered agent, | I |
| | | opted by its board of directors or by an officer so en notified in writing of the change. | |
| M | The second | Marina Hermann, Director | |
| J | t the appointment as registered age | Printed or typed name and title | |
| I turther garee | to comply with the provisions of all | In this agree to the thin this capture. I statutes relative to the proper and complete and accept the obligation of my position as registered o reflect a change in the registered office address, I fled in writing of this change. | |
| Me | ·le | 04/03/2015 | |
| Sig | nature of Registered Agent | Date | |
| If signing on be | ehalf of an entity: | | |
| | yped or Printed Name | | |
| | There or a rimon ranne | | |

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