

PO9 000093753

(Requestor's Name)

(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:

Office Use Only



000337844550

12/12/19--01012--008 **35.00

FILED

2019 DEC 12 PM 6:38

SECRETARY OF STATE
TALLAHASSEE, FL

C.S.

JAN 14 2020

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: ADDRESS CHANGE FOR REGISTERED AGENT
Name of Corporation

DOCUMENT NUMBER: P09000093753

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:

SANDY KANTOROW

Name of Contact Person

MCGOEY, SHARFL & CO. CPA'S PA

Firm/Company

639 EAST OCEAN AVENUE, STE 101

Address

BOYNTON BEACH, FL 33435

City/State and Zip Code

SANDRA@CPAPALMBEACH.COM

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

For further information concerning this matter, please call:

SANDY KANTOROW

Name of Contact Person

at (561) 734-8599
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**

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: ACCELERATE MARKETING INC.
2. The principal office address: 239 CARAVELLE DRIVE, JUPITER, FL 33458
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 11-09-2009 Document number: P09000093753
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)

RYAN LYNN STEINOLFSON

7516 HIGH AVENUE

LA JOLLA, CA 92037

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

RYAN LYNN STEINOLFSON

239 CARAVELLE DRIVE

P.O. Box NOT acceptable

JUPITER, FL 33458

SECRETARY OF STATE
TALLAHASSEE, FL

2019 DEC 12 PM 6:38

FILED

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.


(Signature of officer or director)

RYAN LYNN STEINOLFSON

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 of Registered Agent)

12/4/19

(Date)

If signing on behalf of an entity:

ACCELERATE MARKETING INC.

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)