## P090000 94029

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## **COVER LETTER**

Amendment Section

TO:

Division of Corporations		
DECISTEDED AGENT AND CHANGE	OF ADDRESS	
SUBJECT: REGISTERED AGENT AND CHANGE Name of Corporation	OF ADDRESS	
Name of Corporation		
DOCUMENT NUMBER: P09000094029		
The enclosed Statement of Change of Registered C	Office/Agent and fee are submitted for filing.	
Please return all correspondence concerning this m	natter to the following:	
VINCENT SABLE		
Name of Contact Person	<del></del>	
BLOC 3 DESIGN, INC.		
Firm/Company		
7551 WILES ROAD, 202		
Address		
CORAL SPRINGS, FL 33067		
City/State and Zip Code		
vsable@bloc3design.com		
E-mail address: (to be used for future annual re	eport notification)	
For further information concerning this matter, ple	ease call:	
VINCENT SABLE	at ( 954 ) 854 2483	
Name of Contact Person	at (954 ) 854 2483  Area Code & Daytime Telephone Number	
Enclosed is a \$35.00 check made payable to the De	epartment of State.	
Mailing Address: Amendment Section	Street Address:	
	Amendment Section	
Division of Corporations	Division of Corporations The Centre of Tallahassee	
P.O. Box 6327	The Centre of Tananassee	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

CR2E045 (04/13)

Tallahassee, FL 32314

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

statement of cha	nge is submitted for a corporation	17.0502, 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 t	he corporation: BLOC 3 DESIGN.	INC	
2. The principal	office address: 7551 WILES ROAL	D. 202, CORAL SPRINGS, FLORIDA 33067	
3. The mailing a	ddress (if different): SAME		
4. Date of incorp	oration/qualification: 11-25-2009	1) 16   Z0 09 Document number: P09000094029	
	street address of the current regis tment of State: (If resigned, enter	tered agent and registered office on file with the resigned)	
	VINCENT SABLE		
1761 W HILLSBORO BLVD., 207, DEERFIELD BEACH, FL 33442			
		7020	1
6. The name and (if changed):	street address of the new register	ed agent (if changed) and /or registered office	
	VINCENT SABLE		PH
	7551 WILES ROAD, 202, CORAL		ن بہ
		P.O. Box NOT acceptable	00
The street addre as changed will	ss of its registered office and the be identical.	street address of the business office of its registered agr	ent,
Such change wa authorized by th	is authorized by resolution duly a board, or the corporation has b	dopted by its board of directors or by an officer so een notified in writing of the change.	
Muce	to Selle	VINCENT SABLE, TREASURER	
-	e of an officer or director	Printed or typed name and title	_
l further agrée t of my duties, an document i <del>c</del> beil	a comply with the provisions of i	gent and agree to act in this capacity, all statutes relative to the proper and complete performs the obligation of my position as registered agent. Or, if we in the registered office address, I hereby confirm that hange.	ince this the
Muc	entable.	JUNE 10, 2020	
Sigi	nature of Registered Agent	Date	
If signing on bel	half of an entity:		
BLOC 3 DESIGN	N, INC.	_	
Ту	rped or Printed Name		

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