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(Reque	stor's Name)	- '	
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PICK-UP	WAIT	MAIL	
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(Docur	nent Number)		
Certified Copies	Certificates of	Status	
Special Instructions to Filing Officer:			
	J. HORNE	13	





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COVER LETTER

T9: Amendment Section Division of Corporations		
SUBJECT: MARK MOFFITI Name of Corporation		
DOCUMENT NUMBER: 45-3	479317	
The enclosed Statement of Change of Registered Offi	ice/Agent and fee are submitted for filing.	
Please return all correspondence concerning this matt	ter to the following:	
MARK SILVER PETTIT Name of Contact Person MARK MOFFITI INC Firm/Company 4313 S Mary Cir Address Palm Beach Gordun Fr City/State and Zip Code BAMBOO ED BUD (E-mail address: (to be used for future annual repo		
MARK MOFFITH INC		
Firm/Company		
4318 S Mary Ur		
Palm Beach Gordens Fr City/State and Zip Code	33410	
BAMBOOEDBUDG	e Guail.com	
E-mail address: (to be used for future annual repo	ort notification)	
For further information concerning this matter, please	call:	
MARIL DOHAH	VEIN \$ 794.3519	
Name of Contact Person	Area Code & Daytime Telephone Number	
Enclosed is a \$35.00 check made payable to the Depa	urtment of State.	
Mailing Address:	Street Address:	
Amendment Section	Amendment Section	
Division of Corporations P.O. Box 6327	Division of Corporations	
r.U. DUX 0327	The Centre of Tallahassee	

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

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 in order to change its registered office or registered agent, or both, in the State of Florida.
ALL ALCOUNT
1. The name of the corporation: Work Motified Lyc. 2. The principal office address: 4318 S. Wary Cit
2. The principal office address: 4318 S. Mary Cir Palm Black Balance & 33410
3. The mailing address (if different): 4. Date of incorporation/qualification: 10/11/2312 Document number: 45-34-7317
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)
Mark Motit
4318 S. Mary Cir
Palm Beach Bardens, FL 33410 Ex E
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Mark Pettitt
43/8 S. Mary Cir.
Palm Beach Saldus, FL 33410
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 an officer or director Marke Wafitt Printed or typed name and little
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 Mark Pethitt Date
If signing on behalf of an entity:
Mark Mofith Tuc. Typed or Printed Name

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (04/13)

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