## 017000058486

(Re	equestor's Name)	
(Ac	ldress)	
(Ac	ddress)	
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	MAIT	MAIL
(Bu	usiness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to	Filing Officer:	

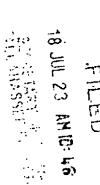




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SY-CH



July 5, 2018

GREGG THUOT 2ND STREET ENTERPRISES, INC. 510 SE 5TH AVE UNIT 307 FORT LAUDERDALE, FL 33301

SUBJECT: 2ND STREET ENTERPRISES, INC.

Ref. Number: P12000058486

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

We are enclosing a computer printout which reflects the registered agent and registered office now on file with this office. Please amend your document accordingly.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Susan Tallent Regulatory Specialist II

Letter Number:

Letter Number: 918A00013810

18 JUL 23 PH 12: 34 PORETARY OF STATE

## **COVER LETTER**

TO: Amendment Section Division of Corporations
2nd Street Enterprises, Inc.
Name of Corporation P12000058486
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:
Gregg Thuot
Name of Contact Person
2nd Street Enterprises, Inc.
Firm/Company
510 SE 5th Ave Unit 307
Address
Fort Lauderdale, FL 33301
City/State and Zip Code
greggcapones@gmail.com /
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Shawn Cliche at ( 802 ) 233-0000  Name of Contact Person Area Code & Daytime Telephone Number
Name of Contact Person Area Code & Daytime Telephone Numb
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, 617.05 statement of change is submitted for a corporation orga		his
in order to change its registered office or regis	· ·	
1. The name of the corporation: 2nd Street Enter	prises, Inc.	
2. The principal office address: 310 SW 2nd Stre	et, Fort Lauderdale, FL 33312	
3. The mailing address (if different):		
4. Date of incorporation/qualification: July 02, 201	2	86
5. The name and street address of the current registered Florida Department of State: (If resigned, enter resign		
Resigned CMK LAW, PA		
1203 S. FEDERAL HIGHWAY		
DEERFIELD BEACH, FL 33441	18   18   18   18   18   18   18   18	18: JUL
6. The name and street address of the new registered age (if changed):	ent (if changed) and /or registered offices	FILED
Gregg Thuot		<u>ਬ</u>
510 SE 5th Ave Unit 307		5)
Fort Lauderdale, FL 33312	•	
The street address of its registered office and the street as changed will be identical.	address of the business office of its registere	ed agent.
Such change was authorized by resolution duly adopted authorized by the board, or the corporation has been no	d by its board of directors or by an officer so officed in writing of the change.	
Signature of an officer or director	Shawn Cliche/ President	<del></del>
I hereby accept the appointment as registered agent are I further agree to comply with the provisions of all state performance of my duties, and I am familiar with and agent. Or, if this document is being filed merely to refine the confirm that the corporation has been notified.	nd agree to act in this capacity. Tutes relative to the proper and complete accept the obligation of my position as regist- lect a change in the registered office address in writing of this change.	ered ;, I
	7/19/2018	
Signature of Registered Agent  If signing on habalf of an autism	Date	
If signing on behalf of an entity:		
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 (03/12)

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