(Address)  (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: HORNE  JUL 2 4 2024					
(Address)  (City/State/Zip/Phone #)  PICK-UP WAIT MAIL  (Business Entity Name)  (Document Number)  Certified Copies Certificates of Status  Special Instructions to Filing Officer: HORNE	(Requestor's Name)				
(Address)  (City/State/Zip/Phone #)  PICK-UP WAIT MAIL  (Business Entity Name)  (Document Number)  Certified Copies Certificates of Status  Special Instructions to Filing Officer: HORNE					
(Address)  (City/State/Zip/Phone #)  PICK-UP WAIT MAIL  (Business Entity Name)  (Document Number)  Certified Copies Certificates of Status  Special Instructions to Filing Officer: HORNE					
(City/State/Zip/Phone #)  PICK-UP WAIT MAIL  (Business Entity Name)  (Document Number)  Certified Copies Certificates of Status  Special Instructions to Filing Officer:	(Address)				
(City/State/Zip/Phone #)  PICK-UP WAIT MAIL  (Business Entity Name)  (Document Number)  Certified Copies Certificates of Status  Special Instructions to Filing Officer: HORNE					
(City/State/Zip/Phone #)  PICK-UP WAIT MAIL  (Business Entity Name)  (Document Number)  Certified Copies Certificates of Status  Special Instructions to Filing Officer: HORNE	(Address)				
PICK-UP WAIT MAIL  (Business Entity Name)  (Document Number)  Certified Copies Certificates of Status  Special Instructions to Filing Officer: HORNE	,				
PICK-UP WAIT MAIL  (Business Entity Name)  (Document Number)  Certified Copies Certificates of Status  Special Instructions to Filing Officer: HORNE					
(Business Entity Name)  (Document Number)  Certified Copies Certificates of Status  Special Instructions to Filing Officer: HORNE	(City/State/Zip/Phone #)				
(Business Entity Name)  (Document Number)  Certified Copies Certificates of Status  Special Instructions to Filing Officer: HORNE					
(Business Entity Name)  (Document Number)  Certified Copies Certificates of Status  Special Instructions to Filing Officer: HORNE	PICK-UP WAIT MAIL				
(Document Number)  Certified Copies Certificates of Status  Special Instructions to Filing Officer:					
(Document Number)  Certified Copies Certificates of Status  Special Instructions to Filing Officer: HORNE					
Certified Copies Certificates of Status  Special Instructions to Filing Officer:	(Business Entity Name)				
Certified Copies Certificates of Status  Special Instructions to Filing Officer:					
Certified Copies Certificates of Status  Special Instructions to Filing Officer: HORNE					
Special Instructions to Filing Officer: HORNE	(Document Number)				
Special Instructions to Filing Officer: HORNE					
Special Instructions to Filing Officer: HORNE	Cartified Contact Configurator of Status				
	Certified Copies Certificates of Status				
	Special Instructions to Filing Officer				
JUL 2 4 2024	J. HORNE				
JUL 2 4 2021	ፈርበር ላ <i>ድ</i> በ በ				
	JUL 2 4 2021				

Office Use Only



900432580879

07/11/24--01015--020 \*\*35.00

2624 JULY 11 SEE 1:21

## **COVER LETTER**

TO:	Amendment Section Division of Corporations		ę.
era i	ECT: BANDERA LAW FIRM, PA		
Name	of Corporation		
DOC	UMENT NUMBER: P13000000464		<u>.</u>
The er	nclosed Statement of Change of Registered (	Office/Agent and fee	e are submitted for filing.
Please	return all correspondence concerning this n	natter to the followir	ng:
JANE	T BANDERA		
Name	of Contact Person		
BANI	DERA LAW FIRM, PA		
Firm/0	Company		
13118	State Road 64 E, #105		
Addre	SS		
Brade	nton, FL 34212		
City/S	state and Zip Code		
	jbandera@banderalawfirm.com	n	
E-ma	il address: (to be used for future annual i	report notification)	
	·	•	
For fu	orther information concerning this matter, plants	ease call:	
Janet	Bandera	at ( 314	) 691-4386 de & Daytime Telephone Number
	Name of Contact Person	`Arca Co	de & 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

Amendment Section **Division of Corporations** The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Street Address:

CR2E045 (04/13)

## 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, or organized under the laws of the State of FLORID registered agent, or both, in the State of Florida.	
1. The name of t	he corporation: BANDERA LAW	FIRM, PA	
2. The principal	office address: 13118 State Road 6	4 E. # 105 Bradenton, FL 34212	
3. The mailing a	ddress (if different):		
4. Date of incorp	poration/qualification: 12/26/2012	Document number: P13000000464	
	I street address of the current regis tment of State: (If resigned, enter t	stered agent and registered office on file with the resigned)	
	RESIGNED		
6. The name and (if changed):	street address of the new registere	ed agent (if changed) and /or registered office	262h J. T.
	Janet Bandera		, <u> </u>
	13118 State Road 64 E, #105		
	Bradenton, FL 34212	P.O. Box NOT acceptable	13 6
	Diadelion, 11. 54212		
The street addre as changed will	ss of its registered office and the be identical.	street address of the business office of its registe	red agent.
Such change wa	s authorized by resolution duly a e board, or the corporation has be	dopted by its board of directors or by an officer seen notified in writing of the change.	80
and	t bunlern	Janet Bandera, President	
\	e of an officer or director	Printed or typed name and title	
of my duties, and document is bei	the appointment as registered ago o comply with the provisions of a d I am familiar with and accept to ug filed merely to reflect a chang been notified in writing of this cl	ent and agree to act in this capacity, all statutes relative to the proper and complete pe he obligation of my position as registered agent, e in the registered office address, I hereby confir hange.	rformance Or, if this m that the
Juni	et Banlera	6/24/2-24	
Sigr	nature of Registered Agent	Date	
If signing on bel	nalf of an entity;		
Janet Bandera	_		
Ty	ped or Printed Name		

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