## Division of Corporations Electronic Filing Cover Sheet

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(((H240001953753)))



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To:

Division of Corporations

Fax Number : (850)617-6380

from:

Account Name : INCORP SERVICES INC

Account Number : 120120000007 : (702)866-2500 : (702)900-2290 Fax Number

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address: managedreports@incorp.com

## REGISTERED AGENT CHANGE THE FREE RIDE INC.

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$35.00

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Help

(((H24000195375 3)))

## **COVER LETTER**

TO: Amendment Division of O	Section Corporations		
SUBJECT: THE FF			
DOCUMENT NUM	IBER: P13000010131		
The enclosed Statem	ent of Change of Registered (	Office/Agent and fee are submitted for filin	g.
	espondence concerning this n	_	
Jaycie Howard			
Name of Contact Per	rson		~
InCorp Services, Ir	n <b>c</b> .		124
Firm/Company			
9107 West Russel	l Road Suite 100		· <b>天</b>
Address			芸: 中
Las Vegas, NV 89	148-1233		Sp. 🚒
City/State and Zip C	ode		7) 00
	managedreports@incorp.com	m	71 to 72
E-mail address: (to	be used for future annual r	m report notification)	2024 JUN -4 AM 8: 25
For further informati	on concerning this matter, ple	ease call:	
avcie Howard on bel	half of InCorp Services, Inc	(702) 966 2500	
-	e of Contact Person	at (702) 866 - 2500 Area Code & Daytine Telepho	ne Number
Enclosed is a \$35.00	check made payable to the D	Department of State.	
<u>Mailing</u> Ameno	g Address: Iment Section	Street Address: Amendment Section	
	on of Corporations	Division of Corporations	
	ox 6327	The Centre of Tallahassee	
Tallahi	assec. FL 32314	2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303	

CR2E045 (04/13)

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

statement of ch	provisions of sections 607. ange is submitted for a corp er to change its registered o	poration organized	under the laws of the Stat	e of Florida
1. The name of	the corporation: THE FRE	EE RIDE INC.	.,	•
2. The principal	office address: 501 E La	s Olas Blvd, Suit	e 300	····································
		derdale. FL 3330		
3. The mailing a	address (if different):			
4. Date of incor	poration/qualification:	01/30/2013	_Document number:	P13000010131
	d street address of the curre runent of State: (If resigned		and registered office on fi	ile with the
	MIRRAS, MICHAEL			
	5318 SW 22ND PLAC			
	CAPE CORAL, FL 339	914		
6. The name and (if changed):	d street address of the new t InCorp Services, Inc.			ed office SSSS
		<del></del>		(P)。 <b>8. 2</b>
	3458 Lakeshore Drive	P.O. Bex. NOT	autontichie	
	Tallahassee, FL 32312			<del></del>
The street address changed will	ess of its registered office a be identical.	and the street addr	ess of the business office	of its registered agent,
	as authorized by resolution he board, or the corporation			
The Con	me Muses	<b>1_</b> Ja	ames Mirras, Secretary	
े।हुम <u>ा</u> क	ce of an officer of director		Printed or typed name	and title
-l further agree -of my duties, ar -document is bei	the appointment as registe to comply with the provisi ad I am familiar with and a ing filed merely to reflect a s been notified in writing o	ons of all statutes i accept the obligata a change in the res	relative to the proper and on of my position as regis	l complete performance stered agent. Or, il this
			05/31/2024	
Sig	natuse of Registered Agent		Date	
If signing on be	chalf of an entity:			
Louise Broytenba	ich on behalf of InCorp Service	es, inc.		
Ĭ.	yped or Frinted Name	······································		

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLARASSEE, FL 32314 CR2E048 (04/13)

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