

P13000097578

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

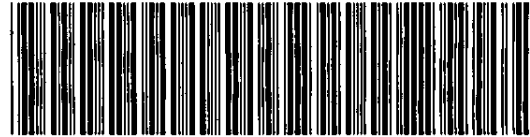
(Business Entity Name)

(Document Number)

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Ra office change

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: 777 Processing Inc

Name of Corporation

DOCUMENT NUMBER: P13000097578

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:

Rizza Bernales

Name of Contact Person

777 Processing Inc

Firm/Company

845 N Garland Avenue Suite 200C

Address

Orlando FL 32801

City/State and Zip Code

777processing@gmail.com

E-mail address: (to be used for future annual report notification)

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SECRET
TALLAHASSEE

For further information concerning this matter, please call:

Rizza Bernales

Name of Contact Person

at (301) 820-0511

Area Code & 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

Street Address:

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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 FL in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: 777 Processing Inc

2. The principal office address: 845 N Garland Avenue Suite 200C Orlando FL 32801

3. The mailing address (if different): _____

4. Date of incorporation/qualification: 12/06/2013 Document number: P13000097578

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)

Rizza Bernales

845 N Garland Avenue Suite 200C

Orlando FL 32801

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Rizza Bernales

2840 Boat Cove Circle

P.O. Box NOT acceptable

Kissimmee FL 34746

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.

Rizza Bernales

Signature of an officer or director

Rizza Bernales

Printed or typed name and title

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.

Rizza Bernales

Signature of Registered Agent

10/20/2014

Date

If signing on behalf of an entity:

Typed or Printed Name

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

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SECRETARY OF STATE
TALLAHASSEE, FL