

P14000013425

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

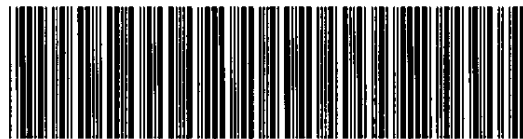
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

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C. CARROTHERS



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

August 8, 2014

ANTHONY BLANC  
5125 COLUMBO CT.  
DELRAY BEACH, FL 33484

SUBJECT: CRYKEY INC.  
Ref. Number: P14000013425

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

The attached form must be completed in order to file the document.

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

Cathy A Carrothers  
Regulatory Specialist

Letter Number: 314A00017019

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**NAME OF CORPORATION:** CRYKEY, INC.

**DOCUMENT NUMBER:** P14000013425

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

ANTHONY BLANC

(Name of Contact Person)

(Firm/ Company)

5125 Columbo Ct.

(Address)

Delray Beach, FL 33484

(City/ State and Zip Code)

For further information concerning this matter, please call:

Andrew Greene

(Name of Contact Person)

at ( 954 ) 894-7222

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

☒ \$35 Filing Fee

☐ \$43.75 Filing Fee &  
Certificate of Status

☐ \$43.75 Filing Fee &  
Certified Copy  
(Additional copy is  
enclosed)

☐ \$52.50 Filing Fee  
Certificate of Status  
Certified Copy  
(Additional Copy  
is enclosed)

**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, 617.0502, 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.

1. The name of the corporation: CRYKEY INC
2. The principal office address: 5125 COLUMBO CT  
DELRAY BEACH, FL, 33484
3. The mailing address (if different): \_\_\_\_\_
4. Date of incorporation/qualification: 2/10/14 Document number: P14000093425
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)  
TONY BLANC  
5125 COLUMBO CT  
DELRAY BEACH, FL, 33484

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):  
ANTHONY BLANC  
5125 COLUMBO CT  
DELRAY BEACH, FL, 33484

P.O. Box NOT acceptable

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]  
Signature of an officer or director

ANTHONY BLANC (Pres)  
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.

[Signature]  
Signature of Registered Agent

3/9/15  
Date

If signing on behalf of an entity:

ANTHONY BLANC  
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