

P14000055594

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

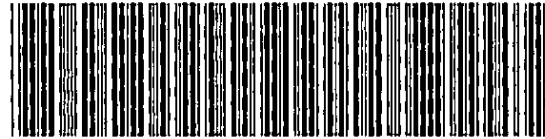
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2018 SEP 24 PM 12:00

STATE OF FLORIDA
TALLAHASSEE, FLORIDA

R0/chg

SEP 25 2018

ALBRITTON

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Address change of registered office
Name of Corporation

DOCUMENT NUMBER: P14000055594

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:

Shibu Varughese
Name of Contact Person

Polar Business Solutions, Inc
Firm/Company

2123 Martin Rd
Address

Dover, FL 33527
City/State and Zip Code

polarbusiness02@outlook.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Shibu Varughese at (813) 431-7947
Name of Contact Person 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

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

1. The name of the corporation: Polar Business Solutions, INC
2. The principal office address: 2123 Martin Rd
Dover, FL 33527
3. The mailing address (if different): _____

4. Date of incorporation/qualification: 06/26/2014 Document number: P14000055594

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)

2123 Martin Rd
Dover, FL 33527

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

1805 MEDFORD LANE
Brandon, FL 33511

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, of the corporation has been notified in writing of the change.


Signature of an officer or director

Shibu Varughese, President

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 of Registered Agent

09/20/2018

Date

If signing on behalf of an entity:

Typed or Printed Name

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