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(Re	equestor's Name)
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PICK-UP		MAIL
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Certified Copies	_ Certificate	es of Status
Special Instructions to	Filing Officer:	
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COVER LETTER

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TO: Amendment Section Division of Corporations

SUBJECT: ^{8 Brothers Inc} Name of Corporation

DOCUMENT NUMBER: P1400062079

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:

Nadia Sushinskiy	
Rame of Contact Person	
8 Brothers Inc	
Firm/Company	
636 E 21st St	
Address	
Jacksonville, FL 32206	
City/State and Zip Code	
accounting@8brothers.com	
E-mail address: (to be used for future annual report notification)	

For further information concerning this matter, please call:

 Nadia Sushinskiy
 at (⁹⁰⁴)²²⁰⁵¹¹⁹

 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 The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

CR2E045 (04/E3)

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: ⁸ Brothers Inc

2. The principal office address: 636 E 21st St Jacksonville. FL 32206

3. The mailing address (if different): ____

_____ Document number: _____ 4. Date of incorporation/qualification: ²⁰¹4

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)

	Sysa, Katie	-		
	636 E 21st St			
	Jacksonville, FL 32206	- 13 133 133	2021	
The name and (if changed):	d street address of the new registered agent (if changed) and /or registered of	fice	SEP 13	لی اور
	Nadia Sushinskiy		PH	103
				
	P.O. Box NOT acceptable	<u>نب</u> ا ا	07	
	lacksonville, FL 32206			

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.

ignature of an afficer or director

6. The

Anadoliy Sushinski President

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 natified in writing of this change.

Signature of Registered-Agent

09-78-2021 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 CR2E045 (04/13)