

PI4000 093183

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

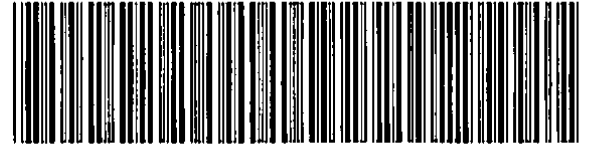
(Business Entity Name)

(Document Number)

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C. GOLDEN

AUG 12 2019

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Regenere Products Inc
Name of Corporation

DOCUMENT NUMBER: P14000093183

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:

Kimberly Thorpe
Name of Contact Person

Regenere Products Inc
Firm/Company

PO Box 566
Address

Largo Florida 33779
City/State and Zip Code

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

For further information concerning this matter, please call:

Mitch Beasley at (727) 7427451
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: Regenere Products Inc.,
2. The principal office address: 2240 Ashbury Dr Clearwater Florida 33764
3. The mailing address (if different): PO Box 566 Largo FL 33779

4. Date of incorporation/qualification: 11/17/2014 Document number: P14000093183

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)

Ana Harwood
4917 Lyford Cay Road
Tampa Florida 33629

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

Mitch Beasley
2240 Ashbury Drive
Clearwater Florida 33764
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

Ana Harwood, Director
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

7-25-19
Date

If signing on behalf of an entity:

Mitchel Beasley
Typed or Printed Name

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