P15000019653

(Requestor's Name)				
(Address)				
/Addison				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
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50 10/12/20

COVER LETTER

TO:	Amendment Section Division of Corporations
SURJ	ECT: CK PREMIER INC.
Name	ECT: CK PREMIER INC. of Corporation
DOC	UMENT NUMBER: P15000019653
The ei	nclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.
Please	return all correspondence concerning this matter to the following:
	A KONIG
Name	of Contact Person
	REMIER INC.
Firm/0	Company
1111.5	SW 1st Avenue, Unit 2416
Addre	SS
Miami	i, FL 33130
City/S	tate and Zip Code
	lucelia100@hotmail.com
E-ma	I address: (to be used for future annual report notification)
For fu	rther information concerning this matter, please call:
CELIA	A KONIG at (917) 623-9428 Name of Contact Person Area Code & Daytime Telephone Number
	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

Amendment Section
Division of Corporations
The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Street Address:

CR2E045 (04/13)

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	provisions of sections 607,0502, 617.05 nge is submitted for a corporation orga r to change its registered office or regis	mized under the laws of the State of <u>FL</u>	ORIDA		
1. The name of t	he corporation: CK PREMIER INC.				
2. The principal	office address: 1111 SW 1st Avenue, Un	it 2416, Miami, FL 33130			
3. The mailing a	ddress (if different): 1111 SW 1st Aven	ue, Unit 2416, Miami, FL 33130			
4. Date of incorp	poration/qualification: 03/02/2015	Document number: P15000019	653		
5. The name and	I street address of the current registered tment of State: (If resigned, enter resign	agent and registered office on file with			
	BUSINESS FILINGS INCORPORATEI)			
	1200 South Pine Island Road			~ `	
	Disserting III 22224			020 A	₹٠٨٠
6. The name and street address of the new registered agent (if changed) and /or registered off (if changed):				2020 AUG 27 AH 10: 29	in Su
•	CELJA KONIG		SEC.	0 H	Ċ
	1111 SW 1st Avenue, Unit 2416		FA	: 29	
	P.O. B	ox NOT acceptable	• •		
	Miami, FL 33130				
The street address changed will	ess of its registered office and the stree be identical.	t address of the business office of its	registe	red ag	ent,
Such change wa authorized by th	as authorized by resolution duly adopte ne board, or the corporation has been n	ed by its board of directors or by an olotified in writing of the change.	fficer s	ю	
Ce	lia Koonia	CELIA KONIG, Director and Preside	ent		
Signatu	re of an officer or director	Printed or typed name and title			
I hereby accept I further agree a of my duties, an document is bei corporation has	the appointment as registered agent a to comply with the provisions of all sta d I am familiar with and accept the ob ng filed merely to reflect a change in t s been notified in writing of this chang	nd agree to act in this capacity. stutes relative to the proper and comp ligation of my position as registered a he registered office address. I hereby e.	lete pe agent. confir	erform Or, if m that	ance this t the
Cel	Lic Kooni §	0 3 - 17 - 20 Date			
_	- "	Date			
It signing on be	half of an entity:				
	Yped or Printed Name				
	* * * FILING F	EE: \$35.00 * * *			