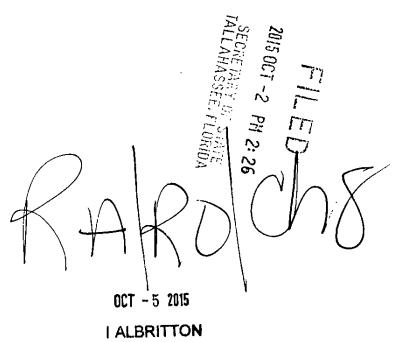
(Re	equestor's Name)	
(A	ddress)	
(A	ddress)	
(C	ity/State/Zip/Phone #)	
PICK-UP	WAIT MAIL	
(B	usiness Entity Name)	
(Document Number)		
Certified Copies	Certificates of Status	
Special Instructions to Filing Officer:		
!		





600277590386

10/02/15--01003--007 **35.00



COVER LETTER

TO:

Amendment Section Division of Corporations

Glenn Price PA

Name of Corporation

DOCUMENT NUMBER:

P15000030252

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:

Glenn Price

Name of Contact Person

Glenn Price PA

Firm/Company

720 Jefferson Avenue #6

Address

Miami Beach, FL 33139

City/State and Zip Code

GlennPrice7@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Glenn Price

,561 285-2000

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

statement of cha	ange is submitted for a corporatio	617.0502, 607.1508, or 617.1508, Florida Statutes, this on organized under the laws of the State of Florida or registered agent, or both, in the State of Florida.
	the corporation: Glenn Price	
2. The principal	office address: 720 Jefferso	n Avenue, #6, Miami Beach, FL 33139
3. The mailing a	address (if different):	
4. Date of incor	poration/qualification: April 1,	2015 Document number: P15000030252
	d street address of the current regirtment of State: (If resigned, enter	istered agent and registered office on file with the resigned)
	Corporation Service Co	ompany
	1201 Hays street	
	Tallahassee, FL 3230	1
6. The name and (if changed):	d street address of the new registe	ered agent (if changed) and /or registered office CECRE AHA
	Glenn Price	130 TH
	720 Jefferson Avenue,	
	Miami Beach, FL 3313	Box NOT acceptable
The street address changed will	ess of its registered office and the be identical.	e street address of the business office of its registered agent,
	la	adopted by its board of directors or by an officer so been notified in writing of the change.
	re of an efficer or director	Glenn Price, President Printed or typed name and title
I hereby accept I further agree to performance of agent. Or, if the	the appointment as registered a to comply with the provisions of my duties, and I am familiar wit	gent and agree to act in this capacity. all statutes relative to the proper and complete th and accept the obligation of my position as registered to reflect a change in the registered office address, l otified in writing of this change.
Sig	nature of Registered Agent	September 18, 2015
	half of an entity:	_

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