## P15000034646

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## **COVER LETTER**

TO:

Amendment Section Division of Corporations

SUBJECT: CELFEE, INC

Name of Corporation

P1500034646

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:

Sunny Moroz

Name of Contact Person

CELFEE, INC

Firm/Company

11309 Countryway Blvd

Address

Tampa, Florida 33626

City/State and Zip Code

info@celfee.com

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

For further information concerning this matter, please call:

Sunny Moroz

.813

997-0866

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	nge is submitted for a corporation organ	12, 607.1508, or 617.1508, Florida Statutes, this nized under the laws of the State of <mark>Florida</mark> ered agent, or both, in the State of Florida.
1. The name of	the corporation: CELFEE,INC.	
2. The principal	office address: 11309 Countrywa	y Blvd Tampa,FL 33626
3. The mailing a	address (if different): same	
<del> </del>		· · · · · · · · · · · · · · · · · · ·
4. Date of incor	poration/qualification: 04/01/2016	Document number: P15000034646
	d street address of the current registered a rtment of State: (If resigned, enter resigned	agent and registered office on file with the ed)
	Sunny Moroz	TALE THE
	12813 Saddle Club Cir #303	AH AN
	Tampa Florida 33635	
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):		
	Sunny Moroz	<u>≯</u>
11309 Countryway Blvd		
C	P.O. Box NOT Tampa Florida 33626	acceptable
The street addre	ess of its registered office and the street be identical.	address of the business office of its registered agent,
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.		
		Sunny Moroz, President
-	the appointment as registered agent an	Printed or typed name and title
I further agree is performance of agent. Or, if the	the appointment as registered agent and comply with the provisions of all state my duties, and I am familiar with and a is document is being filed merely to reflect the corporation has been notified in	ites relative to the proper and complete ccept the obligation of my position as registered ect a change in the registered office address. I
		5/4/2017
Sig	Mure of Registered Agent	Date
If signing on be	half of an entity:	
т	yped or Printed Name	

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (03/12)

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