

P15000092589

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP

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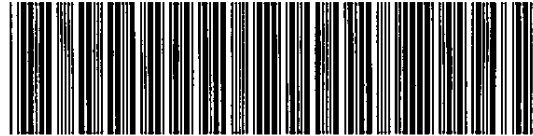
(Business Entity Name)

(Document Number)

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DIVISION OF CORPORATIONS
SECRETARY OF STATE

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COVER LETTER

TO: Amendment Section
Division of Corporations

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RECEIVED
AMENDMENT SECTION
DIVISION OF CORPORATIONS
11 P. 11. 19

SUBJECT: 77 S&R ENTERPRISES INC.
Name of Corporation

DOCUMENT NUMBER: P15000092589

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:

RABIA BANO
Name of Contact Person

77 S&R ENTERPRISES INC
Firm/Company

6899, West Colonial Drive
Address

Orlando FL 32818
City/State and Zip Code

KHANMSR@AOL.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

RABIA BANO at (407) 496-9031
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: 77 S&R ENTERPRISES INC.
- 2. The principal office address: 4636 RIVER GEM AVE, WINDERMERE FL 34786
- 3. The mailing address (if different): _____
- 4. Date of incorporation/qualification: 11-16-2015 Document number: P15000092589

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)

RABIA BANO
4636, RIVER GEM AVE
WINDERMERE, FL 34786

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

RABIA BANO
6899 West Colonial Drive
P.O. Box NOT acceptable
ORLANDO, FL 32818

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DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

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.

Rabia Bano
Signature of an officer or director

Rabia Bano
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.

Rabia Bano
Signature of Registered Agent

08/01/2016
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