

P16000048155

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

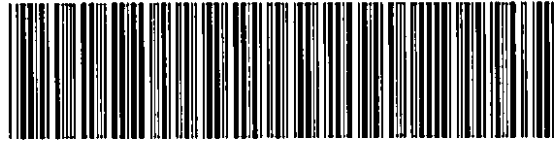
(Business Entity Name)

(Document Number)

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JULY 19 2018
DIVISION OF CORPORATE AFFAIRS

AUG 21 2018

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Businesssone Inc
Name of Corporation

DOCUMENT NUMBER: PI6000048155

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:

Todd Myers
Name of Contact Person

Businesssone Inc
Firm/Company

28051 US Hwy 19 N, Suite 104
Address

Clearwater, FL 33761
City/State and Zip Code

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

For further information concerning this matter, please call:

Todd Myers at (813) 406-3164
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

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DIVISION OF CORPORATIONS
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 _____ in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Businessone Inc
2. The principal office address: 28051 US Hwy 19N, Suite 104
Clearwater FL 33761
3. The mailing address (if different): _____

4. Date of incorporation/qualification: 5/31/16 Document number: P16000048155
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)

Todd Myers Filing cancelled
3935 Tampa Road 1 due to returned check
Oldsmar, FL 34611

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

Todd Myers
28051 US Hwy 19N, Suite 104
Clearwater, FL 33761
P.O. Box, Not Acceptable

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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.

Signature of an officer or director
Todd Myers, President
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

8/15/18
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
CR2E045 (03/12)