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#### **COVER LETTER**

TO:

Amendment Section Division of Corporations

SUBJECT: GypSea Artifacts

Name of Corporation

DOCUMENT NUMBER. EIN# 81-3567378

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:

#### Barbara McDonald

Name of Contact Person

GypSea Artifacts

Firm/Company

550 SE 5th Court

Address

Pompano Beach, FL 33060

City/State and Zip Code

### barbiemcdonald21@comcast.net

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

For further information concerning this matter, please call:

Barbara McDonald

, 561 \ 289-7663

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	inge is submitted for a corporation o	7.0502, 607.1508, or 617.1508, Florida Statutes, to rganized under the laws of the State of Florida egistered agent, or both, in the State of Florida.	this	
	the corporation: GypSea Artifac			
2. The principal	office address: 550 SE 5th Co	ourt, Pompano Beach, FL 33060		
3. The mailing a	ddress (if different):			
4. Date of incorp	poration/qualification: 8-16-2016	6	Planova	
5. The name and		red agent and registered office on file with the		
	United States Corporatin Agents Inc			
13302 Winding Oak Court A				
	Tampa, FL 33612		75	
6. The name and (if changed):	l street address of the new registered	agent (if changed) and /or registered office	AP 15 MII. O	
	Barbara McDonald		5 *	
	550 SE 5th Court			
	P.O. Box NOT acceptable			
	Pompano Beach, FL 330	060		
The street address changed will	ess of its registered office and the st be identical.	reet address of the business office of its register	ed agent,	
Such change was authorized by the	as authorized by resolution duly ado be board, or the corporation has been	opted by its board of directors or by an officer so in notified in writing of the change.	)	
mai	xuex11	Barbara McDonald - Owner		
I hereby accept I further agree performance of	the appointment as registered agen to comply with the provisions of all my duties, and I am familiar with a is document is being filed merely to that the corporation has been notifi	Printed or typed name and title  at and agree to act in this capacity.  statutes relative to the proper and complete  and accept the obligation of my position as regis  breflect a change in the registered office addres.  are also be reflect a change in the registered office.	tered s, I	
BNO	anu	9/13/2016		
Sig	nature of Registered Agent	Date		
If signing on be	half of an entity:			
<u>Subar</u>		•		
Т	yped or Printed Name			

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