## P16 0000079647

(Requestor's Name)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Busiless Linky Name)		
(Document Number)		
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SECRETARY OF STATE

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To palaba

## **COVER LETTER**

TO: Amendment Section Division of Corporations	
SUBJECT: Hosco, Inc.	
Name of Corporation	
DOCUMENT NUMBER: P16000079647	
The enclosed Statement of Change of Registere	ed Office/Agent and fee are submitted for filing.
Please return all correspondence concerning thi	
Dianna L. Wheeler	
Name of Contact Person	
Hosco, Inc.	
Firm/Company	<del></del>
316 U.S. Route 1, Suite F	
Address	
York, Maine 03909	
City/State and Zip Code	
dianna@ges-america.com	
E-mail address: (to be used for future annua	l report notification)
For further information concerning this matter,	please call:
Dianna L. Wheeler	. 207 . 571-8500
Name of Contact Person	at (207 )571-8500  Area Code & Daytime Telephone Number
Enclosed is a \$35.00 check made payable to the	Department of State.
Mailing Address: Amendment Section	Street Address:
Division of Corporations	Amendment Section Division of Corporations
P.O. Box 6327	The Centre of Tallahassee
Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810
	Tallahassee, Fl. 32303

CR2E045 (04/13)

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607,0502, 617,0, statement of change is submitted for a corporation organization in order to change its registered office or regi	anized under the laws of the State of Florida
1. The name of the corporation: Hoseo, Inc.	
2. The principal office address: 8116 Lakeview Drive No	orth, Effenton, FL 34222
3. The mailing address (if different): 316 U.S. Route 1.	Suite F. York, Maine 03909
4. Date of incorporation/qualification: 09-28-2016	Document number: P16000079647
5. The name and street address of the current registered Florida Department of State: (If resigned, enter resigned)	d agent and registered office on file with the
Corporation Service Company	
1201 Hays Street	
Tallahassee, FL 32230	
6. The name and street address of the new registered as (if changed):	gent (if changed) and /or registered office
Dianna L. Wheeler	
7601 E. Treasure Drive-Suite 220	
P.O.	Box NOT acceptable
North Bay Village, FL 33141	
The street address of its registered office and the streas changed will be identical.	eet address of the business office of its registered agent,
Such change was authorized by resolution duly adop authorized by the board or the corporation has been	
Maltitus Illus Signature of an officer or director	- Malcolm Seheult Printed or typed name and fille
I bounder account the approintment as registered agent	and agree to act in this capacity. tatutes relative to the proper and complete performance obligation of my position as registered agent. Or, if this the registered office address. Thereby confirm that the
Tannah Whaelen	July 29, 2020
Signature of Registered Agent	Date
If signing on behalf of an entity:	S 20
Dianna L.Wheeler	TO PA
	FEE: \$35.00 * * *
MAKE CHECKS PAYABLE TO I  MAIL TO: DIVISION OF CORPORATIONS  LTR2F045 (04/LX)	FLORIDA DEPARTMENT OF STATE  5. P.O. BOX 6327, TALLAHASSEE, FL 323747