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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

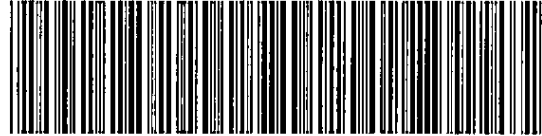
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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DIVISION OF CORPORATIONS
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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: GoGig Jobs Inc.

Name of Corporation

DOCUMENT NUMBER: _____

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:

Christopher Hodges

Name of Contact Person

GoGig Jobs Inc.

Firm/Company

1499 South Federal Highway #240

Address

Boynton Beach, FL 33435

City/State and Zip Code

hodes@gogig.com

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

For further information concerning this matter, please call:

Chris Hodges

Name of Contact Person

at (972) 998-7084

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
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**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: GoGig Jobs Inc.

2. The principal office address: 135 East Atlantic Avenue
Delray Beach, FL 33444

3. The mailing address (if different): _____

4. Date of incorporation/qualification: 09/30/2016 Document number: _____

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)

1499 South Federal Highway, Suite 239

Boynton Beach, FL 33435

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

135 East Atlantic Avenue

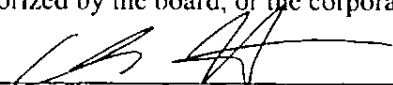
Delray Beach, FL 33444

P.O. Box NOT acceptable

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FLORIDA 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.

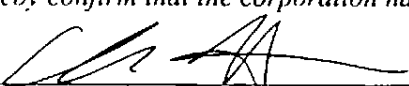


Signature of an officer or director

Christopher Hodges

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 of Registered Agent

~~09/30/2016~~ 10/14/2019

Date

If signing on behalf of an entity:

Christopher Hodges

Typed or Printed Name

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