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COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: Frames & Features Corp

DOCUMENT NUMBER: P16000080314

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:

Mario A. Iglesias, Esq.	
Name of Contact Person	
MAI Law Firm	
Firm/Company	
660 NE Ocean Blvd., Suite 4S	E
Address	
Stuart, FL 34996-1623	
City/State and Zip Code	
miglesias@maifirm.com	
E-mail address: (to be used t	or future annual report notification)
For further information concerning this matte	r, please call:
Mario A. Iglesias	at <u>305-390-2711</u>
Name of Contact Person	Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:Street Address:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center Circle

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

Pursuant to the provisions of sections 607,0502 or 617,0508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of <u>Florida</u> in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: <u>Frames & Features Corp</u>

2. The principal office address: 104 Angelfish Lane, Jupiter, FL 33477

3.	The mailing address (if different):
4.	Date of incorporation/qualification: 09/30/2016 Document number: P16000080314
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)
	James, Randall - RESIGNED
	4230 S McDill Ave Suite E-224
	Tampa, FL 33611
6.	The name and street address of the new registered agent (if changed) and/or registered office (if
(7.	changed):
	Mario A. Iglesias, Esq.
	MAI Law Firm
	660 NE Ocean Blvd., Suite 4SE
	Stuart, FL 34996
The stre	eet address of its registered office and the street address of the business office of its registered agent, as
	I will be identical.
Such cl	lange was authorized by resolution duly adopted by its board of directors or by an officer or authorized
	poard, or the corporation has been notified in writing of the change.
1/12	
(W	Signature of an officer or director Printed or wheel name and title
ノー	
I hereh	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
familia	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
notifica	in writing of this change.
//	N() - 2 /2 /2020 部 R 可
\longrightarrow) 3 d 2 0 0 0 0 0 0 0 0 0
	Signature Registered Agent Date
10.	ng on behalf of an entity:
11 signii	ng on behalf of an entity:
Ma	rio Ig esias
•	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