P16000097583

(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer: On Sept. 2, 202 Ms. Raquel Penaluer Called about her filing. Ms. Penaluer's registered	1 ,
agent was in our	

Office Use Only

2981



400371727784

08/16/21--01035--023 **35.00



A. Butler 9/3/21

COVER LETTER

TO:

Amendment Section Division of Corporations

Name of Corporation	
DOCUMENT NUMBER: P16000097583	
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:
Corali Lopez-Castro	
Name of Contact Person	
Kozyak Tropin & Throckmorton LLP	
Firm/Company	
2525 Ponce de Leon Blvd., 9th Floor	
Address	
Coral Gables, FL 33134	
City/State and Zip Code	
ele@kttlaw.com	
E-mail address: (to be used for future annual	report notification)
For further information concerning this matter, p	olease call:
Corali Lopez-Castro	at (305) 372-1800 Area Code & Daytime Telephone
Name of Contact Person	Area Code & Daytime Telephone

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

Amendment Section
Division of Corporations

The Centre of Tallahassee 2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Street Address:

CR2E045 (04/13)

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

statement of cha	inge is submitted for a corpor	(12, 6)7,0502, 607,1508, or 617,1508, Florida Statutes, this ation organized under the laws of the State of Florida ce or registered agent, or both, in the State of Florida.
1. The name of t	the corporation; MJ Taxes and	More Inc.
	office address: 2754 W. Atlan	tic Blvd., Pompano Beach, FL 33069
3. The mailing a		
		F2270000049
5. The name and		registered agent and registered office on file with the
	GARCIA, JOHANNA	Tables
	7814 SW 8TH COURT	
		33068 PN 2
6. The name and (if changed):	l street address of the new reg	istered agent (if changed) and /or registered office
	Corali Lopez-Castro c/o Kozy	ak Tropin & Throckmorton, LLP
	2525 Ponce de Leon Blvd., 9tl	n Floor
		P.O. Box NOT acceptable
	Coral Gables, FL 33134	·
The street addre	ess of its registered office and be identical.	I the street address of the business office of its registered agent.
Such change wa authorized by th	as authorized by resolution d as board, as the corporation b	uly adopted by its board of directors or by an officer so has been notified in writing of the change.
• • _	**************************************	Corali Lopez-Castro
•	re of an officer or director	Printed or typed name and title
I hereby accept I further agree t of my duties, an document is bei, corporation has	the appointment as registere to comply with the provisions d I am familiar with and acc ng filed merely to reflect a co been notified in writing of t	ed agent and agree to act in this capacity. s of all statutes relative to the proper and complete performanc ept the obligation of my position as registered agent. Or, if thi, hange in the registered office address, I hereby confirm that the his change.
		08/13/2021
Sign	Hamir of Registered Agent	Date
If signing on be	half of an entity:	
t ₂	sped 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 (04/13)



August 26, 2021

CORALI LOPEZ-CASTRO KOZYAK TROPIN & THROCKMORTON LLP 2525 PONCE DE LEON BLVD., 9TH FLOOR CORAL GABLES, FL 33134 US

SUBJECT: MJ TAXES AND MORE INC

Ref. Number: P16000097583

We have received your document for MJ TAXES AND MORE INC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent designated must be an active Florida entity or a foreign entity authorized to transact business in Florida. Please correct the document.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 621A00020530

Anissa Butler Regulatory Specialist II

www.sunbiz.org

Della AG de Do Dove coop William Di di coop