## P170000000370

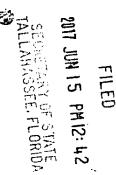
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C. GOLDEN
JUN 1 9 2017

## **COVER LETTER**

TO:

Amendment Section Division of Corporations

SUBJECT: Blankit Insurance Group Inc.

Name of Corporation

P1700000270

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 J. Orletski

Name of Contact Person

Blankit Insurance Group Inc.

Firm/Company

1211 Tech Blvd. Suite 124

Address

Tampa, FL 33619

City/State and Zip Code

ChrisO@myblankit.com

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

For further information concerning this matter, please call:

Chris Orletski

. 855

692-5265x101

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

2. The principal office address; 1211 Tech Blvd. Suite 124  Tampa, FL 33619  3. The mailing address (if different):  4. Date of incorporation/qualification: 12/29/2016 Document number: P17000000270  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)  Mikel Ecenarro  Mikel Ecenarro  Palm Beach Gardens, FL 33410  Christopher J. Orletski  1211 Tech Blvd. Suite 9  Palm Beach Gardens, FL 33410  Christopher J. Orletski  1211 Tech Blvd. Suite 124  PO Box NOT acceptable  Tampa, FL 33619  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 origination has been notified in writing of the change.  Christopher Orletski - President Printed or typed name and time 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 careful and the corporation has been notified in writing of this change.  O6/12/2017  Date  O6/12/2017  Date	1. The name of t	the corporation: Blankit Insura	nce Group Inc.	
Tampa, FL 33619  3. The mailing address (if different):  4. Date of incorporation/qualification: 12/29/2016	7. The name of a	office address: 1211 Tech Blv	rd. Suite 124	
3. The mailing address (if different):  4. Date of incorporation/qualification: 12/29/2016 Document number: P17000000270  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)  Mikel Ecenarro  10475 Riverside Dr. Suite 9  Palm Beach Gardens, FL 33410  6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):  Christopher J. Orletski  1211 Tech Blvd. Suite 124  PO. Box NOT acceptable  Tampa, FL 33619  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 origonation has been notified in writing of the change.  Christopher Orletski - President Printed or typed name and tule  Thereby accept the appointment as registered agent and agree to act in this capacity. If urther agree to comply with the provisions of all statutes relative to the proper and complete performance of my dulies, and I am familiar with and accept the obligation of my position as registered agent. Or, if his document is being filed emerty to reflect a change in the registered office address, I tereby confirm that the corporation has been notified in writing of this change.  06/12/2017  Sugmanufe of Registered Agent				
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Signature of Regrected Agent Date	further goree to	o comply with the provisions of al	l statutes relative to the pro	mer and complete
	Mu	white the same of	<b>06/12/2017</b>	
f signing on behalf of an entity:	Sign	nature of Registered Agent		Date
	, f signing on beh	nall of an entity:		
		ped or Printed Name		

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