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TACTY D WHITE

R. WHITE
JAN 1 6 2018

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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

SUBJECT: DryPro Inc		
	Name of Corporation	
DOCUMENT NUMBER. P1	7000009441	

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:



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

For further information concerning this matter, please call:

Marco Madrid	941	445-0622
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

statement of cha	provisions of sections 607.0502, 617.050. inge is submitted for a corporation organ ir to change its registered office or registe	ized under the laws of the State of <u>F</u> l	orida
	· · · · · · · · · · · · · · · · · · ·	rea agent, or nom, in the state of Pi	oriaa.
1. The name of	the corporation: DryPro Inc office address: 8466 N Lockwood	Ridge Rd #182	
-	i, FL 34243	Thage Ha #102	<del></del>
	address (if different):		
4. Date of incor	poration/qualification: 08-01-2016	Document number: P17000	0009441
	I street address of the current registered at rtment of State: (If resigned, enter resigne		h the
	Marco Madrid		
	6329 Golden Eye Gln		To do
	Lakewood Ranch, Florida 34	1202	2 7
6. The name and (if changed):	I street address of the new registered agen	nt (if changed) and /or registered offic	
	Marco Madrid		PH 12: 11
	8466 N Lockwood Ridge Rd		69
	P.O. Box NOT Sarasota, Florida 34243	acceptable	
as changed will	ess of its registered office and the street a		
Adim loc	re of an officer or director	Adrian Tolentino, CEO	
Lherehy accent	the appointment as registered agent and to comply with the provisions of all statu my duties, and I am familiar with and ac is document is being filed merely to refle that the corporation has been notified in	Printed or typed name and title I agree to act in this capacity, stes relative to the proper and compose sept the obligation of my position a set a change in the registered office a writing of this change.	lete is registered address, I
		January 9, 2018	
Sign	nature of Registered Agent	Date	<del></del>
If signing on be	half of an entity:		
	rped or Printed Name		

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