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Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 Phone : (307)200-2803 Fax Number : (813)436-5206

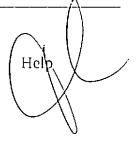
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Address:

REGISTERED AGENT CHANGE FRANDARY GROUP CORP

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$35.00

Electronic Filing Menu Corporate Filing Menu



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

statement of cha	ringe is submitted for a corpo	502, 617,0502, 607,1508, or 617,1508, Florida $\mathfrak S$ oration organized under the laws of the State of $\underline {\mathfrak S}$	Florida
in orde	er to ch <mark>ange its re</mark> gistered off	fice or registered agent, or both, in the State of F	lorida.
1. The name of	the corporation: Frandary Gro	oup Corp.	
2. The principal	office address:		
4. Date of incor	poration/qualification: 02/07	Document number: P1700001	13072
	d street address of the current rtment of State: (If resigned,	t registered agent and registered office on file wi enter resigned)	th the
	RODRIGUEZ, FRANCISCO		
	111 BURNSIDE WAY		
	KISSIMMEE, FL 34744		
6. The name and (if changed):	d street address of the new re	gistered agent (if changed) and /or registered off	ice
	Registered Agents Inc		_
	7901 4th St N STE 300		20
	St. Petersburg FL 33702	P.O. Box NOT acceptable	YWH NZOZ
The street address changed will	ess of its registered office at be identical.	nd the street address of the business office of its	s registered agent
Such change wa authorized by t	as authorized by resolution (he board, or the corporation	duly adopted by its board of directors or by an has been notified in writing of the change.	olficer so 🌣 🛴
Relation	I WINTER OF THE COOK	Robin Jones Printed or typed name and tit	~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~
of my duties, ar document is bei	the appointment as register to comply with the provision ad I am familiar with and ac ing filed merely to reflect a s been notified in writing of	red agent and agree to act in this capacity, ns of all statutes relative to the proper and com cept the obligation of my position as registered change in the registered office address, I hereb this change.	plete performance Lagent. Or, if this ly confirm that the
David Schems		5/9/2024	
Sig	nature of Registered Agent	Date	
If signing on be	chalf of an entity:		
David Roberts			
Т	yped or Printed Name	PI 186 PRI 186	