## P17000016411

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## **COVER LETTER**

TO:

TO: Amendment Section Division of Corporations	
SUBJECT: Alterations Blessed Inc. Name of Corporation	
DOCUMENT NUMBER: P17000016411	
The enclosed Statement of Change of Registered	d Office/Agent and fee are submitted for filing.
Please return all correspondence concerning this	s matter to the following:
Michelina Gentilcore	
Name of Contact Person	
Alterations Blessed Inc	
Firm/Company	<del></del>
953 Old Dixie Hwy, Ste B-8	
Address	
Vero Beach, FL 32968	
City/State and Zip Code	
Michely310@hotmail.com	
E-mail address: (to be used for future annua	l report notification)
For further information concerning this matter,	please call:
Michelina Gentilcore	ot (5165474002 )
Name of Contact Person	at (5165474002) Area Code & Daytime Telephone Number
Enclosed is a \$35.00 check made payable to the	Department of State.
Mailing Address: Amendment Section	Street Address:
	Amendment Section Division of Corporations
Division of Corporations P.O. Box 6327	The Centre of Tallahassee
Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

CR2E045 (04/13)

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

statement of cha	nge is submitted for a corporation o	7.0302, 607.1308, or 617.1308, Florida Statute. Organized under the laws of the State of <mark>Florida</mark> registered agent, or both, in the State of Florida	
1. The name of	the corporation: Alterations Blessed I	Inc	
2. The principal	office address: 953 Old Dixie Hwy.	Ste B-8, Vero Beach, FL 32960	
4. Date of incor	poration/qualification: 10-01-2020	Document number: P17000016411	<del>4.</del>
	I street address of the current registertment of State: (If resigned, enter re	ered agent and registered office on file with the esigned)	
	Mary E Licalzi		
	723 Honeybell Court SW		,
	Vero Beach, FL 32968		
6. The name and (if changed):	d street address of the new registered	I agent (if changed) and /or registered office	हा: ३: ५५
	Michelina Gentilcore		ري ن
	2559 12th Sq SW		Ç
		O. Box NOT acceptable	
	Vero Beach, FL 32968		
The street address changed will	ess of its registered office and the s be identical.	street address of the business office of its regis	stered agent,
Such change wauthorized by the	as authorized by resolution duly ad he board, or the corporation has been	lopted by its board of directors or by an office en notified in writing of the change.	r so
Clicchi	ana Alexandre	Michelina Gentilcore	
I hereby accept I further agree of my duties, ar document is be	to comply with the provisions of al.	Printed or typed name and title ont and agree to act in this capacity. I statutes relative to the proper and complete, e obligation of my position as registered agen in the registered office address, I hereby conj ange.	performance it. Or if this firm that the
(A) - A - C	1000011100	10-6-2020	
Sig	namb oroccustered Agent	Date	
If signing on bo	chalf of an entity:		
Michelina Genti	leore		
<u> </u>	yped or Printed Name		

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

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