## P17000074075

(Re	equestor's Name)	
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PICK-UP	WAIT MAIL	
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## COVER LETTER

TO:

Amendment Section Division of Corporations

Notarology, Inc.

Name of Corporation

P17000074075

AND CT -2 MAG 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:

Robert C. Fiore

Name of Contact Person

Notarology

Firm/Company

401 East Jackson Street, Suite 2140

Address

Tampa, FL 33602

City/State and Zip Code

info@notarology.com

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

For further information concerning this matter, please call:

Benjamin Zeller

Name of Contact Person

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

CR2E045 (03/12)

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

Pursuant to the provisions of sections 607.0502, 617,050 statement of change is submitted for a corporation organ	
in order to change its registered office or regist	• • • • • • • • • • • • • • • • • • • •
1. The name of the corporation: Notarology, Inc.	
2. The principal office address: 401 East Jackson	Street, Suite 2140, Tampa FL 33602
3. The mailing address (if different):	
4. Date of incorporation/qualification: 09-05-2017	Document number: P17000074075
5. The name and street address of the current registered a Florida Department of State: (If resigned, enter resigned)	igent and registered office on file with the
Get Shorty 420, Inc.	
6160 Central Avenue, Suite	200
Saint Petersburg, FL 33707	OCT
6. The name and street address of the new registered age (if changed):	nt (if changed) and /or registered office
Benjamin Zeller	<u> </u>
6061 Central Avenue, Suite	200
Р.О. Вол NOT Saint Petersburg, FL 33707	acceptable
The street address of its registered office and the street as changed will be identical.	
Such change was authorized by resolution duly adopted authorized by the board, or the corporation has been no	by its board of directors or by an officer so titled in writing of the change.
Thomas	Robert C. Fiore
I hereby accept the appointment as registered agent and I further agree to comply with the provisions of all state performance of my duties, and I am familiar with and a agent. Or, if this document is being filed merely to reflect the confirm that the corporation has been notified in	ites relative to the proper and complete
Konyamin Telle	09-27-2017
If signing on behalf of an-entity:	Date
Benyamin Zeller. Typed or Printed Name	
* * * FILING FE	 E: \$35.00 * * *

Make checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, Fl. 32314

CR2E045 (03/12)