Division of Corporations
Electronic Filing Cover Sheet

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(((H24000030548 3)))



H240000305483ABC-

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To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name : COMPUTERSHARE Account Number : 110432003053 Phone : (561)694-8107 Fax Number : (561)214-8442

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email	Address:			

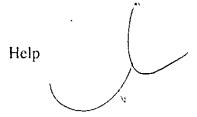
REGISTERED AGENT CHANGE CEOHR, INC

Certificate of Status	0
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Estimated Charge	\$35.00

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Electronic Filing Menu

Corporate Filing Menu



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

statement of cha	unge is submitted for a corporatio	617.0502, 607.1508, or 617.1508, Florida State on organized under the laws of the State of Flot	rida			
		or registered agent, or both, in the State of Flore	ida.			
1. The name of t	the corporation: CEOHR, INC					
2. The principal	office address: 5104 N Lockwood	1 Ridge Road, Suite 201, Sarasota, FL 34234				
4. Date of incorp	poration/qualification: 09/19/2017	Document number: P1700007592	3			
	I street address of the current regitment of State: (If resigned, enter	istered agent and registered office on file with the resigned)	he			
	The S2 HR Group, LLC					
	3001 Executive Drive, Suite 340		2024			
	St. Petersburg, FL 33762		2024 JAN 23 AM 10:			
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):						
	Corporate Creations Network Inc.		0.30			
	801 US Highway I		. 🛈			
	P.O. Box NOT acceptable North Palm Beach, FL 33408					
The street addre	ess of its registered office and the be identical.	e street address of the business office of its re	gistered agent,			
Such change wa authorized by th	is authorized by resolution duly ne board, or the corporation has	adopted by its board of directors or by an offi been notified in writing of the change.	cer so			
	3 57	Saray Djidji, Attorney in Fact				
Signatui	re of an officer or director	Printed or typed name and title				
l further agrée i of my duties, an document is bei	the appointment as registered a to comply with the provisions of d I am familiar with and accept ng filed merely to reflect a chan been notified in writing of this	gent and agree to act in this capacity. all statutes relative to the proper and comple the obligation of my position as registered ag ge in the registered office address, I hereby co change.	te performance yent. Or, if this onfirm that the			
	ST)	01/23/2024				
Sign	nature of Registered Agent	Date				
If signing on be	half of an entity:					
Saray Djidji, Spe	cial Secretary					
T	sped or Printed Name	_				

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