## P17000099966

(Requestor's Name)
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2024 FEB 23 AM 9: 14



## **COVER LETTER**

TO: Amendment Section Division of Corporations	
SUBJECT: FINITE GLOBAL SOLUTIONS INC.	
Name of Corporation	_
DOCUMENT NUMBER:	<u> </u>
The enclosed Statement of Change of Registered Office/Agent and fee are submitted fo	r filing.
Please return all correspondence concerning this matter to the following:	
Stuart Zuckerman	
Name of Contact Person Incorporate247, Inc.	
Firm/Company 949 NW 18th Ave	
Address Boca Raton, FL 33486	
City/State and Zip Code mgt@global-inter.net	2024
E-mail address: (to be used for future annual report notification)	PIL. E
For further information concerning this matter, please call:	HASSE
Stuart Zuckerman 302 386-3888 at ( )	F. S.
Name of Contact Person Area Code & Daytime Te	lephone Nümber

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

Amendment Section Division of Corporations

The Centre of Tallahassee 2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Street Address:

CR2E045 (04/13)

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

statement of cha	provisions of sections 607.0 inge is submitted for a corp or to change its registered o	oration organized under i	the laws of the State of <mark>F</mark> l	orida
		OBAL SOLUTIONS INC.	•	oriuu.
	the corporation:	nue Street Suite# 7495 Wil	Imington Delaware 19801	
3. The mailing a	address (if different):	·		
4. Date of incoη	nddress (if different):  12/20  poration/qualification:	DocuD	P17000099 ment number:	1906
5. The name and	d street address of the current etiment of State: (If resigned	nt registered agent and reg , enter resigned)		
	Registered Agent Solutions.	Inc.		
	2894 Remington Green Ln.	Ste. A		<b></b>
	Tallahassee, FL 32308			
6. The name and (if changed):	d street address of the new t	egistered agent (if change	ed) and /or registered offi	2024 FEB
_	Incorporate 247, Inc.			EB 2
	949 NW 18th Ave			AHASSI
		P.O. Box NOT acceptab	ole	
	Boca Raton, FL 33486			9: 1 E. FL
The street address changed will	ess of its registered office a be identical.	and the street address of	the business office of its	registered agent,
Such change wa authorized by th	as authorized by resolution he board, or the corporatio	duly adopted by its boan i has been notified in wr	rd of directors or by an criting of the change.	officer so
	Love Kimar		Love Kumar, Pres/Dir	
Signatu	re of an officer or director		Printed or typed name and title	c ·
l hereby accept I further agree of my duties, an document is bei corporation has	the appointment as registe to comply with the provisie ad I am familiar with and a ing filed merely to reflect a s been notified in writing o	pred agent and agree to one of all statutes relative copt the obligation of nothing in the registered of this change.	act in this capacity, e to the proper and comp w position as registered I office address, I hereby	olete performance agent. Or, if this confirm that the
Steve	n Stone		2-21-2024	
Sig	nature of Registered Agent		Date	
If signing on be	chalf of an entity:			•
Steve	n Stone			
	yped or Printed Name			
	* * *	FILING FEE: \$35.00	* * *	

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (04/13)