

P18000014309

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



400312765184

05/03/18--01018--028 \*\*35.00

2018 MAY -3 3:11:39

MAY 07 2018  
C McVAIR

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Sipahi Hunting and Tactical inc.

Name of Corporation

**DOCUMENT NUMBER:** P18000014309

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:

Yusuf Sipahi

Name of Contact Person

Sipahi Hunting and Tactical inc.

Firm/Company

418 Cranes Landing Ct

Address

Jacksonville 32216

City/State and Zip Code

sipahiysf@gmail.com

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

For further information concerning this matter, please call:

Yusuf Sipahi

Name of Contact Person

at ( 609 ) 481 71 02

Area Code & Daytime Telephone Number

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

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

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of \_\_\_\_\_ in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Sipahi Hunting and Tactical inc.
2. The principal office address: 4090 Hodges blvd. Apt 207 Jacksonville FL 32224
3. The mailing address (if different): \_\_\_\_\_

4. Date of incorporation/qualification: 02 12 2018 Document number: P18000014309

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

4090 Hodges blvd. Apt 207 Jacksonville FL 32224

6. The name and street address of the new registered agent (if changed) and/or registered office (if changed):

418 Cranes Landing Ct

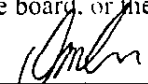
418 Cranes Landing Ct

P.O. Box NOT acceptable

Jacksonville, FL 32216


The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

  
Signature of an officer or director

YUSUF SIPAHI  
Printed or typed name and title

*I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.*

  
Signature of Registered Agent

05 01 2018  
Date

If signing on behalf of an entity:

\_\_\_\_\_  
Typed 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