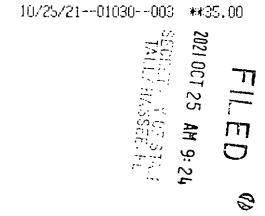
## P18000046588

	(Requestor's Name)
	(Address)
	(Address)
	(City/State/Zip/Phone #)
ļ	PICK-UP WAIT MAIL
	(Business Entity Name)
	(Document Number)
Certified	Copies Certificates of Status
Specia	I Instructions to Filing Officer:
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	Office Use Only



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C. BRUMBLE.

## **COVER LETTER**

TO: Amendment Section Division of Corporations	
SUBJECT: Sortpack, Inc. Name of Corporation	
Name of Corporation	
DOCUMENT NUMBER: P18000046588	
The enclosed Statement of Change of Registered	ed Office/Agent and fee are submitted for filing.
Please return all correspondence concerning thi	is matter to the following:
Tim Henkel	
Name of Contact Person	
Henkel & Cohen, P.A.	
Firm/Company	<del></del>
1730 Main Street, Suite 228	
Address	
Weston, FL 33326	
City/State and Zip Code	<del></del>
tdh@miamibusinesslitigator:	s.com
E-mail address: (to be used for future annua	al report notification)
For further information concerning this matter,	please call:
Tim Henkel	at (305 )389-6745
Name of Contact Person	at (305 )389-6745 Area Code & Daytime Telephone Number
Enclosed is a \$35.00 check made payable to the	2 Department of State.
Mailing Address:	Street Address:
Amendment Section	Amendment Section
Division of Corporations P.O. Box 6327	Division of Corporations 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 ch	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Sta ange is submitted for a corporation organized wider the laws of the State of <mark>Flo</mark> er to change its registered office or registered agent, or both, in the State of Flo	orida	is 			
1. The name of	the corporation: Sortpack, Inc.					
	2. The principal office address: 1751 SW 8th Street, Pompano Beach, FL 33069					
3. The mailing	address (if different):			_		
4. Date of incorporation/qualification: 05/21/2018 Document number: P18000046588						
	d street address of the current registered agent and registered office on file with artment of State: (If resigned, enter resigned)	the				
	Timothy D. Henkel					
	1751 SW 8th Street	297 	202			
	Pompano Beach, FL 33069	<u>≥</u> :::	2021 OCT	<u> </u>		
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):			725 AM			
	Timothy D. Henkel, Esq.		₩ 9:			
	1730 Main Street, Suite 228		։ շկ			
	P.O. Box NOT acceptable Weston, FL 33326			99		
The street addr	ress of its registered office and the street address of the business office of its it be identical.	registere	d agent,			
	as authorized by resolution duly adopted by its board of directors or by an of the board, or the corporation has been notified in writing of the change.					
M	ure of an officer or director  Printed or typed name and title	TU	EASI	MAR		
I further agree of my duties, a document is be	t the appointment as registered agent and agree to act in this capacity to comply with the provisions of all statutes relative to the proper and comp nd I am familiar with and accept the obligation of my position as registered o ing filed merely to reflect a change in the registered office address, I hereby is been notified in writing of this change.	lete perfe agent. C confirm	ormanc or if thi that the	e 5		
Jawil Si,	try J. Kuhel 10/21/22 graphic of Registered Agent Date					
If signing on b	enalf of an entity:					
<del></del>	Typed or Printed Name					
	* * * FILING FFF: \$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)