P18000058788

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COVER LETTER

TO:

Amendment Section Division of Corporations

Noewe Research and Development Inc						
SUBJECT:	· 					
DOCUMENT NUMBER: P18000058788 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:						
					Michelle Marshall	
					Name of Contact Person Michelle Marshall	
Firm/Company Neowe Research and Development Inc.						
Address 2751 South Ocean Dr # 908S Hollywood FL 33019						
City/State and Zip Code monifiquem7@gmail.com						
E-mail address: (to be used for future annua	al report notification)					
For further information concerning this matter.	please call:					
Michelle Marshall	954-629-1144 at ()					
Name of Contact Person	at () Area Code & Daytime Telephone Number					
Enclosed is a \$35.00 check made payable to the	e Department of State.					
Mailing Address: Amendment Section Division of Corporations	Street Address: Amendment Section Division of Corporations					
P.O. Box 6327 Tallahassee, FL 32314	The Centre of Tallahassee 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	ange is submitted for a corporation or	0502, 607.1508, or 617.1508, Florida Statute. ganized under the laws of the State of gistered agent, or both, in the State of Florida	
	Neowe Research and I	· ·	•
	the corporation: 2751 South Ocean Dr # I office address:	908S Hollywood FL 33019	
3. The mailing	address (if different):07/03/2018	FL 116 Dania Beach Fl 33004	
 The maning Date of incor 	poration/qualification:	Document number: P18000058788	
	d street address of the current register artment of State: (If resigned, enter res	ed agent and registered office on file with the igned)	
	Michelle Marshall		
	2751 South Ocean Dr # 908S		
	Hollywood FL 33019		
6. The name an (if changed):		agent (if changed) and /or registered office	
	Michelle Marshall		2921 J
	2751 South Ocean Dr # 908S		ζ
	P.C Hollywood FL 33019	Box NOT acceptable	Ö
The street addr as changed wil	ess of its registered office and the str I be identical.	reet address of the business office of its regis	tered agent.
Such change wauthorized by t	ras authorized by resolution duly ado he board, or the corporation has been	pted by its board of directors or by an office n notified in writing of the change.	r so
NIM	anhell	Michelle Marshall Founder/CEO	
I hereby accep I further agree of my duties, a document is be	ure of an other or director I the appointment as registered agen to comply with the provisions of all, nd I am familiar with and accept the ing filed merely to reflect a change i s been notified in writing of this chai	statutes relative to the proper and complete obligation of my position as registered agen n the registered office address. Thereby con-	performance t. Or, if this firm that the
-171	Narchall	6/19/2024	
Si	gnature of Registered Agent	Date	
If signing on b	ehalf of an entity:		
Michelle Marsha			
	Typed or Printed Name		

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