

P18000 066 230

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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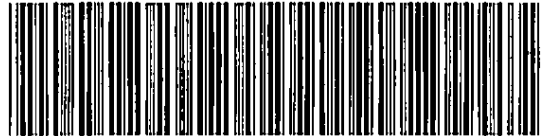
(Business Entity Name)

(Document Number)

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: KAREN WERNERT STUDIO
Name of Corporation

DOCUMENT NUMBER: P18000066230

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:

KAREN WERNERT
Name of Contact Person

KAREN WERNERT STUDIO
Firm/Company

6307 N. 20TH ST.
Address

TAMPA FL 33610
City/State and Zip Code

ODDODOG@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

KAREN WERNERT at (813) 748-3497
Name of Contact Person 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: KAREN WERNERT STUDIO
2. The principal office address: 6307 N. 20th ST.
TAMPA FL 33610
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 8/1/18 Document number: P18000066230
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)

UNITED STATES CORPORATION AGENTS INC.
5575 S. SEMORAN BLVD STE-36
ORLANDO FL. 32822

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

KAREN WERNERT
6307 N. 20th ST.
P.O. Box NOT acceptable
TAMPA FL 33610

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.

Karen Wernert
Signature of an officer or director

KAREN WERNERT
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.

Karen Wernert
Signature of Registered Agent

9/16/19
Date

If signing on behalf of an entity:

KAREN WERNERT
Typed or Printed Name

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