## P180000137140

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## **COVER LETTER**

TO:	Amendment Section Division of Corporations	
	ECT: Coda Production Corp. of Corporation	
DOCU	UMENT NUMBER: P18000073740	
The er	nclosed Statement of Change of Registered	d Office/Agent and fee are submitted for filing.
Please	e return all correspondence concerning this	matter to the following:
Brian I	K. Mathis, Esq.	
Name	of Contact Person	
Mathis	s Law Group	
Firm/C	Company	
P.O. B	30x 91657	
Addre	ess	
Lakela	and, FL 33804	
City/S	state and Zip Code	
	bmathis@mathislawgroup.co	m
E-mai	il address: (to be used for future annua	report notification)
For fu	orther information concerning this matter, p	please call:
Jo Kirl	kland, ACP, FRP	at (863 ) 670-2557  Area Code & Daytime Telephone Number
	Name of Contact Person	Area Code & Daytime Telephone Number
Enclos	sed 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 The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, El. 32303

CR2E045 (04/13)

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

in ord	ange is submitted for a corporation organized under the laws of the State of Flower to change its registered office or registered agent, or both, in the State of Flower to change its registered office or registered agent, or both, in the State of Flower to change its registered agent, or both, in the State of Flower to change its registered agent, or both, in the State of Flower to change its registered agent, or both, in the State of Flower to change its registered agent, or both, in the State of Flower to change its registered agent, or both, in the State of Flower to change its registered agent, or both, in the State of Flower to change its registered agent.		
	the corporation: Coda Production Corp.		
2. The principal	office address: 8404 NW 90th St. Unit 100, Medley, FL 33166		<del></del>
3. The mailing :	address (if different):		
4. Date of incor	poration/qualification: 8/28/2018 Document number: P180000737	74()	
5. The name and Florida Depa	d street address of the current registered agent and registered office on file with rtment of State: (If resigned, enter resigned)	the	
	Riano & Associates, LLC		
	9720 Stirling Road, Ste. 204C	E.L.	2024
	Cooper City, FL 33024	12, 12, 25,	2024 HAY
6. The name and (if changed):	aillaikėseuli	5 E	
	Brian K. Mathis, Esq.	· 	ġ.
	Mathis Law Group, 515 E. Las Olas Blvd. Stc. 120		TC TC
	P.O. Box NOT acceptable F1. Lauderdale, FL 33301		
The street address changed will	ess of its registered office and the street address of the business office of its rebe identical.	egistered a	gent,
Such change was authorized by the	is authorized by resolution duly adopted by its board of directors or by an off ne board or the corporation has been notified in writing of the change.	icer so	
	Recycle 61 L Printed or typed minic and little		
I hereby accept I further agree t of my duties, an document is bei	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 comple at an familiar with and accept the obligation of my position as registered as ing filed merely to reflect a change in the registered office address, I hereby to been notified in writing of this change.		iance f this t the
Dui X	April 24, 2024		
-	half of an entity:		
5			
75	ped or Printed Name		

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