## P180001013666

(Re	equestor's Name)
(Ad	dress)
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(Cit	y/State/Zip/Phone #)
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(Do	ocument Number)
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08/07/23--01038--003 \*\*915.00



## **COVER LETTER**

TO: Amendment Section Division of Corporations

SUBJECT: RON GEN, INC. Name of Corporation

## DOCUMENT NUMBER: P18000101366

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:

Holly Nikolich	
Name of Contact Person	_
Mika & Nikolich, PA	
Firm/Company	_
1330 Main Street, 2nd Floor, Office 1	
Address	-
Sarasota, FL 34236	
City/State and Zip Code	-
Holly1@mnfirm.com	
E-mail address: (to be used for future annual report notification and the second secon	ation)

For further information concerning this matter, please call:

Holly Nikolich	at ( <sup>941</sup> ) <sup>345-7941</sup>
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 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

1. The name of the corporation: \_\_\_\_ RON GEN, INC.

2. The principal office address: 786 S. Orange Avenue, Sarasota, FL 34236

3. The mailing address (if different):

4. Date of incorporation/qualification: <u>12/14/2018</u> Document number: <u>P18000101366</u>

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)

Margaret Shoaf				
46 N. Washington Blvd., Suite 29				
	Sarasota, FL 34236	50	2023	
<ol> <li>The name and (if changed):</li> </ol>	l street address of the new registered agent (if changed) and /or registered off		3 AUG -	
	Holly Nikolich	SSEE		
	1330 Main Street, 2nd Floor, Office 1		PH 12:	$\overline{O}$
	P.O. Box NOT acceptable	ORI	. 03	
	Sarasota, FL 34236	D m	τ.	

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

Friedrich Mayr, VP
Printed or typed name and title

 $\mathbf{\mathcal{V}}$ 

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.

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	/ CALS	E Tresh of MAN 1	11(202)	
Sign	ature of Registered Agent	A TATALAN UT 10	Date	
	8 0	enneunuur		
If signing on beh	alf 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 CR2E045 (04/13)