

P19000011352

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

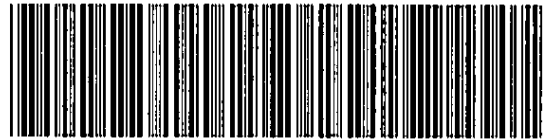
(Business Entity Name)

(Document Number)

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06/02/2021
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2021 APR 29 AM 1:20
SECRETARY OF STATE
HALL COUNTY, MISSISSIPPI

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: SKT MAD INC.
Name of Corporation

DOCUMENT NUMBER: P19000011352

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:

KARLENE CLARK

Name of Contact Person

C/O FSM WEALTH ADVISORS LLC

Firm/Company

23240 CHAGRIN BLVD SUITE 600

Address

CLEVELAND, OH 44122

City/State and Zip Code

KCLARK@FSMWEALTHADVISORS.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

KARLENE CLARK

Name of Contact Person

at (216)

9168424

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

**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 FLORIDA in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: SKT MAD INC
2. The principal office address: 23240 CHAGRIN BLVD SUITE 600 CLEVELAND, OH 44122
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 02/01/2019 Document number: P10000011352
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)

ROGER NUTT

845 N FERN CREEK AVE

ORLANDO, FL 32803

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

SHANE KENNEDY

23240 CHAGRIN BLVD SUITE 600

P.O. Box NOT acceptable

CLEVELAND, OH 44122

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.

Shane Kennedy
Signature of an officer or director

SHANE KENNEDY

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.

Shane Kennedy
Signature of Registered Agent

APRIL 26, 2021

Date

If signing on behalf of an entity:

SHANE KENNEDY

Typed or Printed Name

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE

FILED
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SECRETARY OF STATE
TALLAHASSEE, FL