P19000020927

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COVER LETTER

Amendment Section Division of Corporations

TO:

SUBJECT: JEREMEY TYRANSKY PA Name of Corporation
DOCUMENT NUMBER: P 19000020927
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:
JEREMEY TYRANIKY Name of Contact Person
Firm/Company
7000 249 TH ST E Address
MYAKKA CITY FL 34251 City/State and Zin Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Terement Tyransky at (941) 363-1335 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

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 FL in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: JEREMEY TYRANSKY PA
2. The principal office address: 7000 2497H St Z
MYAKKA CETY FL 34251
3. The mailing address (if different):
4. Date of incorporation/qualification: 3/6/19 Document number: P1900007097
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) — RESTENCA (RETTREA)
BURLLULTON CONSULTANTS LC
9040 TOWN (FLTER PARKWAY
CAKELWON RALX H FL 34702
6. The name and street address of the new registered agent (if changed) and /or registered office of the new registered agent (if changed) and /or registered office of the new registered agent (if changed) and /or registered office of the new registered agent (if changed) and /or registered office of the new registered agent (if changed) and /or registered office of the new registered agent (if changed) and /or registered office of the new registered agent (if changed) and /or registered office of the new registered agent (if changed) and /or registered office of the new registered agent (if changed) and /or registered office of the new registered agent (if changed) and /or registered office of the new registered agent (if changed) and /or registered office of the new registered agent (if changed) and /or registered office of the new registered agent (if changed) and /or registered office of the new registered agent (if changed) and /or registered office of the new registered agent (if changed) and /or registered office of the new registered agent (if changed) and /or registered office of the new registered agent (if changed) and /or registered office of the new registered agent (if changed) and /or registered office of the new registered agent (if changed) and /or registered agent (if changed) agent (if changed) are registered agent (if changed) and /or registered agent (if changed) are registered agent (if changed) and /or registered agent (if changed) are reg
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MYAKKA CTTY FL 34251
The street address of its registered office and the street address of the business office of its registered ager 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 of an officer of director Signature of an officer of director 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 performan of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if the 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.
3)15)21 Signature of Registered Agent Date
If signing on behalf of an entity:
JEREMEY TYRANSKY 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)