P19000030253

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COVER LETTER

TO:

Amendment Section Division of Corporations

SUBJECT: Huncidi Computer Consulting, INC. Name of Corporation		
DOCUMENT NUMBER: P19000030253		
The enclosed Statement of Change of Registere	d Office/Agent and fee are submitted for filing.	
Please return all correspondence concerning this	s matter to the following:	
Muhannad A. Huncidi		
Name of Contact Person		
Huneidi Computer Consulting, INC.		
Firm/Company		
8317 Hawks Gully Ave.		
Address		
Delray Beach, FL 33446		
City/State and Zip Code		
Muhannad_Huncidi@msn.cc	om	
E-mail address: (to be used for future annua	l report notification)	
For further information concerning this matter,	please call:	
Mo Huneidi	at (618)402-3882	
Name of Contact Person	at (618) 402-3882 Area Code & Daytime Telephone Number	
Enclosed is a \$35.00 check made payable to the	Department of State.	
Mailing Address: Amendment Section	Street Address: Amendment Section	
Division of Corporations	Division of Corporations	
P.O. Box 6327	The Centre of Tallahassee	
Tallahassee, FL 32314	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

statement of cha	provisions of sections 607.0502, 617.0502 nge is submitted for a corporation organi r to change its registered office or registe	zed under the laws of the State of FLOF	RIDA		
	he corporation: Huneidi Computer Consult				
2. The principal	office address: 8317 Hawks Gully Ave., De	lray Beach, FL 33446			
3. The mailing a	ddress (if different):				
4. Date of incorp	poration/qualification: 04/03/2019	Document number: P19000030253			
5. The name and	street address of the current registered ag tment of State: (If resigned, enter resigned	ent and registered office on file with the			
	ROCKET LAWYER CORPORATE SERV	/ICES LLC			
	155 OFFICE PLAZA DRIVE 1ST FLOOR, TALLAHASSEE, FL, 32301				
6. The name and (if changed):	t (if changed) and /or registered office	2020 JUL 10			
	8317 Hawks Gully Ave., Delray Beach, FL 33446		<u>-</u>		
	P.O. Box NOT acceptable				
			F11 5		
The street address changed will	ss of its registered office and the street a be identical.	address of the business office of its reg	istered ággnt,		
Such change was authorized by the	as authorized by resolution duly adopted to board, or the corporation has been not	by its board of directors or by an officified in writing of the change.	er so		
Mo H	unclw e of an officer or director	Muhannad A. Huneidi/Owner/Agent Printed or typed name and title	_2		
I further agree t of my duties, an document is bei	the appointment as registered agent and o comply with the provisions of all statu d I am familiar with and accept the oblig ng filed merely to reflect a change in the been notified in writing of this change.	l agree to act in this capacity, tes relative to the proper and complete gation of my position as registered age registered office address, I hereby co.	e performance mt. Or, if this nfirm that the		
Moth	ineidi	06/29/2020			
Sign	nature of Registered Agent	Date			
If signing on be	half of an entity:				
Ty	ped or Printed Name				

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