P19000036938

(Re	questor's Name)	
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(Cit	y/State/Zip/Phone #)	
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COVER LETTER

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 Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

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

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: Magnitical CKIVG CXP
2. The principal office address: 400 Hollywood Blvd 5/1te 555-504 Hollywood - #1 33021
3. The mailing address (if different):
4. Date of incorporation/qualification: <u>OH/25/2019</u> Document number: <u>P1900003693</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)
Mubia D. Mendoza
2507 Taipon Dr. 2507 Taipon Dr.
6. The name and street address of the new registered agent (if changed) and /or registered of its (if changed):
Claudia V. Modrieuez P.
400 Holywood Blvd Sie 555-S
- Hollywood, Fl 33021
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 of an officer or direction Francisco
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.
Moderate of Registered Agent 06/03/2019 Date
If signing on behalf of an entity:
Claudia V. Redrigues Typed or Printed Name
* * * FUANG FEE: \$35.00 * * *

Make checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 CR2E045 (03/12)