P19000044285

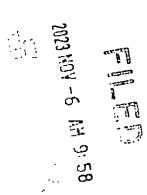
(Requestor's Name)
(Address)
(Address)
(0) (0) (7) (9)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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800418349898

11/06/23--01012--021 **35.00



Amendment Section

COVER LETTER

TO:

Name of Corporation	ARKETING AND RESTORATION, INC.
Traine or Corporation	
DOCUMENT NU	1BER: P19000044285
The enclosed States	ent of Change of Registered Office/Agent and fee are submitted for fi
Please return all cor	respondence concerning this matter to the following:
Abby Salzer	
Name of Contact Po	rson
Dritz Salzer PLLC	
Firm/Company	
1646 W Snow Ave #	93
Address	
Tampa, FL 33606	
City/State and Zip (ode
	adsalzer@dritzsalzer.com
E molt odda oo 4	be used for future annual report notification)

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

Name of Contact Person

Street Address:

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

at (813) 687-8990 Area Code & Daytime Telephone Number

CR2E045 (04/13)

Abby Salzer

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

statement of cha	nge is submitted for a corporation	617.0502, 607.1508, or 617.1508, Florida St n organized under the laws of the State of $\frac{\Pi}{2}$	lorida
		r registered agent, or both, in the State of Flood A Rustaration Tra	oriaa.
	the corporation: Zito Marketing an		
2. The principal	office address; 3612 E. Royal Pali	n Circle, Tampa, FL 33629	
3. The mailing a	address (if different): 1409 E Bake	er St. Plant City, FL 33563	
		Document number: P19000044	1285
5. The name and		stered agent and registered office on file with	
	Danielle Marazzito		
	3612 E Royal Palm Circle		
	Tampa, F1, 33629		202 5
6. The name and (if changed):	d street address of the new register	red agent (if changed) and /or registered offic	2023 NOV -6
	Abby Salzer		
	Dritz Salzer PLLC		A
		P.O. Box. NOT acceptable	9: 57
	1646 W Snow Ave #193, Tampa,	FL 33606	
The street addreas changed will	ess of its registered office and the be identical.	e street address of the business office of its	registered agent.
Such change wa authorized by the	as authorized by resolution duly and board, or the corporation has b	adopted by its board of directors or by an obeen notified in writing of the change.	fficer so
lede litoropyle		Josh Marazzito	
Signata	re of an officer or director	Printed or typed name and little	
I further agree of my duties, ar document is hei	the appointment as registered a to comply with the provisions of ad I am familiar with and accept ing filed merely to reflect a chang s been notified in writing of this c	gent and agree to act in this capacity, all statutes relative to the proper and comp the obligation of my position as registered ge in the registered office address. I hereby change.	plete performance agent. Or, if this confirm that the
Alyna	-A11	10/4/2023	
<u>\</u> \\\\\\\\\\\\\\\\\\\\\\\\\\\\	mature of Legistered Agent	Date	
V If signing on be	half of an entity:		
res	and a Name of State	_	
1	yped 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)