

P19 0000 52398

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

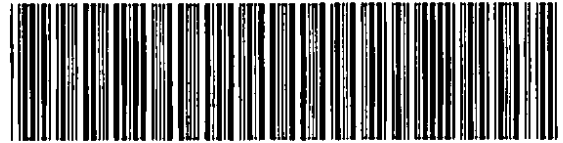
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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05/26/2021
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SECRETARY OF STATE
FALL ARRESTED

FILED

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: One Stop Studios
Name of Corporation

DOCUMENT NUMBER: P19000052398

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:

Joshua Kennedy
Name of Contact Person
One Stop Studios
Firm/Company
1317 Edgewater Dr. #108
Address
Orlando, FL 32804
City/State and Zip Code
contact@lstopstudios.com

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

For further information concerning this matter, please call:

Joshua Kennedy at (407) 498-5806
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

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: One Stop Studios
2. The principal office address: 1317 EDGEWATER DR #108 ORLANDO, FL 32804
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 06/20/2019 Document number: P19000052398
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)

LEGALINC CORPORATE SERVICES INC.

5237 SUMMERLIN COMMONS SUITE 400

FORT MYERS, FL 33907

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

Kelly Miller

1317 Edgewater Dr

P.O. Box NOT acceptable

Orlando, FL 32084

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]
Signature of an officer or director

John Kennedy Co-CEO
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.

[Signature]
Signature of Registered Agent

04/11/2021

Date

If signing on behalf of an entity:

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)

FILED
2021 APR 19 PM 1:53
SECRETARY OF
STATE
TALLAHASSEE, FL