

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

P1900007397

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H20000006505 3)))



H200000065053ABCS

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page.
Doing so will generate another cover sheet.

To:
Division of Corporations
Fax Number : (850)617-6380

From:
Account Name : REGISTERED AGENTS INC.
Account Number : I20090000081
Phone : (307)200-2803
Fax Number : (855)330-1010

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

**REGISTERED AGENT CHANGE
CLUSTERED SOLUTIONS, INC**

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$35.00

Electronic Filing Menu

Corporate Filing Menu

Help

O SIMMONS

JAN - 8 2020

FILED

2020 JAN - 7 AM 11:36

SECRETARY OF STATE
TALLAHASSEE, FL

2020 JAN - 7 PM 12:29

**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 _____ in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Clustered Solutions, Inc
2. The principal office address: 695 CENTRAL AVE STE 15010 ST. PETERSBURG, FL 33701
3. The mailing address (if different): _____

4. Date of incorporation/qualification: 08/22/2019 Document number: P19000067397

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)

CINDY'S FLORIDA LLC
695 CENTRAL AVE STE 15010
ST. PETERSBURG, FL 33701

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

Registered Agents Inc.
7901 4th St N STE 300
P.O. Box NOT acceptable
St. Petersburg FL 33702

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.

Cynthia Davies
Signature of an officer or director

Cynthia Davies, Secretary
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.

Bill Havre
Signature of Registered Agent

1/7/2020
Date

If signing on behalf of an entity:

Bill Havre
Typed or Printed Name

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

FILED
2020 JAN -7 AM 10:36
SECRETARY OF STATE
TALLAHASSEE, FL