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SECRETARY OF STATE
TALLAHASSEF, STATE

COVER LETTER

TO:

Amendment Section Division of Corporations

SUBJECT: Hooper Management Group Name of Corporation	
DOCUMENT NUMBER: P19000091098	
The enclosed Statement of Change of Registere	ed Office/Agent and fee are submitted for filing.
Please return all correspondence concerning thi	s matter to the following:
David Hooper	
Name of Contact Person	**************************************
Hooper Management Group	
Firm/Company	
821 SE 2nd CT	
Address	
Fort Lauderdale, FL 33301	
City/State and Zip Code	
davidh@hoopergroup.co.uk	
E-mail address: (to be used for future annua	ıl report notification)
For further information concerning this matter,	please call:
David Hooper	ot (610 \)757-8434
Name of Contact Person	at (610)757-8434 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	nge is submitted for a	corporation organiz	607.1508, or 617.1508 red under the laws of the	e State of Florida	
		20	ed agent, or both, in the	[,] State of Florida.	
1. The name of	the corporation: Hoope	er Management Group			
2. The principal	office address: 821 SE	2nd CT, Fort Laudere	dale, FL 33301		
4. Date of incorporation/qualification: 12/12/2019 Document number: P19000091098					
	d street address of the criment of State: (If resign		ent and registered office	on file with the	
	David Hooper				
	302 NE 8th Ave				
	Fort Lauderdale, FL 33	3301		<u>.</u>	
6. The name and (if changed):	d street address of the n	new registered agent	(if changed) and /or reg	gistered office	
	David Hooper			AA	I JAN 26
	821 SE 2nd Ct.			488 988	
		P.O. Box	NOT acceptable	S. L. C.	
	Fort Lauderdale, FL 33	3301			AM 10: 1,3
The street address changed will	ess of its registered off be identical.	fice and the street a	ddress of the business of	office of its regis	ယ tered agent,
Such change was authorized by the	as authorized by resolute board, or the corpor	ution duly adopted l ration has been noti	by its board of directors fied in writing of the ch	s or by an officer nange.	' so
Jane 1			David Hooper, President	t	
Sighalu	re of an officer or director			d name and title	
I further agree of my duties, an document is bei	the appointment as re to comply with the pro d I am familiar with a ing filed merely to refl s been notified in writi	ovisions of all statut and accept the oblig lect a change in the	agree to act in this cap es relative to the prope ation of my position as registered office addre	pacity. Prand complete p Pregistered agent Pacific Streets and the second of the secon	performance t. Or, if this irm that the
λ mir λ			11/02/2020		
SVg	nature of Registered Agent		Da	ite	
If signing on be	half of an entity:				
	yped or Printed Name				
-					

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