

P19 000000 92520

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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WAIT

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MAIL

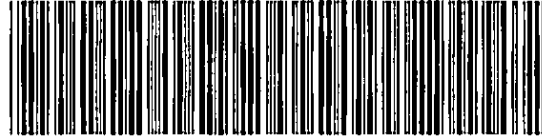
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

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## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Put It In Your Mouth Records, Inc.  
Name of Corporation

**DOCUMENT NUMBER:** P19000092520

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:

Zanita Fenton

Name of Contact Person

Put It In Your Mouth Records, Inc.

Firm/Company

1317 Edgewater Dr., #4180

Address

Orlando, FL 32804

City/State and Zip Code

info@putitinyourmouthrecords.com

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

For further information concerning this matter, please call:

Zanita Fenton

at ( 786 ) 253-9189  
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: Put It In Yoour Mouth Records, Inc.
2. The principal office address: 1317 Edgewater Dr., #4180, Orlando, FL 32804
3. The mailing address (if different): \_\_\_\_\_
4. Date of incorporation/qualification: 12/6/2019 Document number: P19000092520
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)

Registered Agents Inc

7901 4th St. Nste 300, St. Petersburg, FL 33702

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
- PhysicalAddress.com
- 1317 Edgewater Dr.
- Orlando Florida 32804
- P.O. Box NOT acceptable

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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 director

Zanita Fenton, Vice President

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.

zackary close  
Signature of Registered Agent

6/23/22

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)