P20000002761

(Requestor's Name) (Address) (Address)					
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PICK-UP WAIT MAIL					
(Business Entity Name)					
(230,1335 2,111, 1,011,0)					
(Document Number)					
Certified Copies Certificates of Status					
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COVER LETTER

Division of Corporations
SUBJECT: Pegasus Advisors, Inc. Name of Corporation
DOCUMENT NUMBER: P20000002761
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 Enriquez
Name of Contact Person
Pegasus Advisors, Inc.
Firm/Company
23679 Calabasas Rd, Unit 1133
Address
Calabasas, CA 91302
City/State and Zip Code
joshua@pegasus-advisors.net <u></u>
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
joshua enriquez <u>at (310</u>) 357 5545
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 Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

CR2E045 (03/12)

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

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida S ange is submitted for a corporation organized under the laws of the State of _ ar to change its registered office or registered agent, or both, in the State of I	FLORIDA		
1. The name of	the corporation: Pegasus Advisors, Inc.			
	office address: 7901 4th St N, STE 300 St. Petersburg , FL 33702		<u>-</u>	
3. The mailing a	address (if different): 23679 Calabasas Rd., Unit 1133, Calabasas, CA 91302			
4. Date of incorp	poration/qualification: 01/01/2020 Document number: P200000	02761		
	d street address of the current registered agent and registered office on file wrtment of State: (If resigned, enter resigned)	ith the		
	Joshua Enriquez			
	23679 Calabasas Rd, Unit 1133			*
	Calabasas, CA 91302		21	<u> 54</u>
6. The name and (if changed):	d street address of the new registered agent (if changed) and /or registered of	fice	JAN -8	3 23 25H
	Registered Agents Inc.		Ī	OF STATE
	7901 4th St N STE 300		કૃ ૫૩	
	P.O. Box NOT acceptable			¥
	St. Petersburg FL 33702			
The street address changed will	ess of its registered office and the street address of the business office of it l be identical.	s registered a	agent,	
Such change wa authorized by the	as authorized by resolution duly adopted by its board of directors or by an he board, or the corporation has been notified in writing of the change.	officer so		
Jashua En	Joshua Enriquez, President ure of an officer or director Printed or typed name and til			
I hereby accept I further agree performance of agent Or if th	t the appointment as registered agent and agree to act in this capacity, to comply with the provisions of all statutes relative to the proper and confirm duties, and I am familiar with and accept the obligation of my position is document is being filed merely to reflect a change in the registered office that the corporation has been notified in writing of this change.	npletc n as registere	гd	
Bee Han	01/03/2021			
Sig	gnature of Registered Agent Date		_	
If signing on be	chalf of an entity:			
Bill Havre	Typed or Printed Name			
1	* * * 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 (03/12)