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.

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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : REGISTERED AGENT SOLUTIONS INC

Account Number : I20100000062 Phone : (888)705-7274 Fax Number : (888)706-7274

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

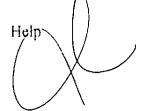
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REGISTERED AGENT CHANGE RYAN OAKES INC

Certificate of Status	0
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Page Count	01
Estimated Charge	\$35.00

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COVER LETTER

TO:

Amendment Section Division of Corporations

RYAN OAKES INC

Name of Corporation

OCUMENT NUMBER: P2000006185

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:

Mary Castillo		
Name of Contact Person		
Registered Agent Solutions, Inc.		2024
Firm/Company	Ι,	2
Corporate Center One, 5301 Southwest Pkwy, Ste 400	-	Ţ-,
Address		
Austin, Texas 78735		1:-
City/State and Zip Code		: :
E-mail address: (to be used for future annual report notification)	— t.	[], (j): U4
For further information concerning this matter, please call:		
Mary Castillo		
Name of Contact Person Area Code & Daytime To	elenhone Nur	mber

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

CR2E045 (04/13)

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

		$22,617.0502,607.1508,$ or $617.1508,$ Florida S ation organized under the laws of the State of $oxedsymbol{oxed}$	
		e or registered agent, or both, in the State of F	
1. The name of	the corporation: RYAN C	DAKES INC	
2. The principal	office address:		
3. The mailing a	iddress (if different):		
		1/2020 Document number: P200	00006185
5. The name and		egistered agent and registered office on file wit	
	WEISS, JESS	SICA D	
	7665 TRENTON DRIVE		2024
	LAKE WORTH	FL 33467	2020 33.5 14
6. The name and (if changed):	i street address of the new regi	stered agent (if changed) and /or registered off	
	Registered Ager	nt Solutions, Inc.	다.
	2894 Remington G	Green Ln. Ste. A	.
	Tallahassee	P.O. Box NOT acceptable FL 32308	
The street address changed will	ess of its registered office and be identical.	the street address of the business office of its	s registered agent,
Such change wa authorized by th	as authorized by resolution du ne board, or the corporation ha	lly adopted by its board of directors or by an as been notified in writing of the change.	officer so
s/ Ryan O	akes re of an officer or director	Ryan Oakes Printed or typed name and tit	President
l further agrée (of my duties, an docúment is bei	the appointment as registered to comply with the provisions ad I am familiar with and acce ing filed merely to reflect a ch s been notified in writing of th	d agent and agree to act in this capacity. of all statutes relative to the proper and com opt the obligation of my position as registered ange in the registered office address, I hereb is change.	plete performance Lagent. Or, if this y confirm that the
М	معان الله معامد	08/13/2024	
Sig	nature of Registered Agent	Date	
If signing on be	half of an entity:		
	er, Assistant Secretary sped or Printed Name		
,		ILING FEE: \$35.00 * * *	

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