## P20000015154

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
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2022 JAN 18 AN 9: 52

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

statement of cha	provisions of sections 607.0302, 617.0302 inge is submitted for a corporation organiz ir to change its registered office or register	zed under the laws of the State of Florid	da	
1. The name of (	the corporation: The Resch Kids Holding In	c.		
2. The principal	office address: 4834 Davis Blvd., Naples, F	Torrac 3 TV T		
	address (if different):			
4. Date of incorp	poration/qualification: 2/20/2020	Document number: P20000015154	<del></del>	
	I street address of the current registered ag timent of State: (If resigned, enter resigned		2	
	HF Registered Agents, LLC			
	1715 Monroe Street			
	Fort Myers, FL 33901			
6. The name and (if changed):	I street address of the new registered agent	(if changed) and /or registered office	[F] 2022 JAH	
	HL Statutory Agent, Inc.	ー	§ 71	
	5811 Pelican Bay Blvd., Suite 650			
		NOT acceptable		
	Naples, FL 34108		المحتوب وب	
as changed will				
Such change wa authorized by the	as authorized by resolution duly adopted ne board, or the corporation has been not	by its board of directors or by an offic fied in writing of the change.	er so	
kelly Musica		Kelly Musico, President		
I hereby accept I further agree of my duties, an document is bei corporation has	te of an officer or director  the appointment as registered agent and to comply with the provisions of all statu, ad I am familiar with and accept the oblig- ing filed merely to reflect a change in the s been potified in writing of this change.	Printed or typed name and title agree to act in this capacity, tes relative to the proper and complete ation of my position as registered age registered office address, I hereby con	e performance nt. Or, if this nfirm that the	
Genne L. Deculald		December 29, 2021		
Sig	nature of Registered Agent	Date		
If signing on be	half of an entity:			
Jeanne L. Seewa	ld, Vice President			
T	yped or Printed Name			
	* * * FILING FEI	E: \$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)