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(Re	equestor's Name)			
(Ac	ddress)			
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(Ci	ty/State/Zip/Phone	e #j		
PICK-UP	WAIT	MAIL		
(В	usiness Entity Nan	ne)		
(Document Number)				
Certified Copies	_ Certificates	of Status		
Special Instructions to	Filing Officer:			
	Office Use Onl	v		



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COVER LETTER

TO:

TO: Amendment Section Division of Corporations		
SUBJECT: Busy Tree, Inc. Name of Corporation		
Name of Corporation		
DOCUMENT NUMBER: P20000021826		
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:	
Samantha Jackson		
Name of Contact Person		
Meriam Corporate Services, Inc.		
Firm/Company		
PO Box 52588		
Address		
Mesa AZ 85208		
City/State and Zip Code		
meriamfinancial@gmail.con	n	
E-mail address: (to be used for future annua		
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
For further information concerning this matter,	please call:	
Samantha Jackson	318.8456	
Name of Contact Person	at (720) 318.8456 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 corpora	12, 617,0502, 607,1508, or 617,1508, Florida Statut ition organized under the laws of the State of <u>Flo</u> we or registered agent, or both, in the State of Floria	rida
	he corporation: Busy Tree, Inc		***
2. The principal	office address: 14 E Washingto	on St Ste 406 Orlando FL 32801	
4. Date of incorp	oration/qualification: $\frac{03/06/2}{}$	020 Document number:P200000218	:26
5. The name and		egistered agent and registered office on file with the	
	Anthony DiPalma		
	1202 LOGAN DR		
	LONGWOOD, FL 32750		7020
6. The name and (if changed):	street address of the new regi	istered agent (if changed) and /or registered office	7020 HAY 18
	Anthony DiPalma		P }
	14 E Washington St Ste 406		<u>ئ</u> ئ
		P O Box NOT acceptable	08
	Orlando FL 32801		
The street addre	ss of its registered office and be identical.	the street address of the business office of its reg	istered agent,
Such change wa authorized by th	s autho rized by resolution due board, or the corporation h	ily adopted by its board of directors or by an offic as been notified in writing of the change.	er so
11/19		Anthony DiPalma, President	
	e of an officer of director	Printed or typed name and title d agent and agree to act in this capacity.	
l further agree t of my duties, an document is bai	o comply with the provisions 41-am familiar with and acce	of all statutes relative to the proper and complete 2pt the obligation of my position as registered age lange in the registered office address, I hereby co	performance nt. Or, if this nfirm that the
AMI		05/07/2020	
Nigi	nature of Registered Agent	Date	
If signing on be	nalf of an entity;		
	ped or Printed Name		

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