

P20 0000 221 08

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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☐ WAIT

☐ MAIL

(Business Entity Name)

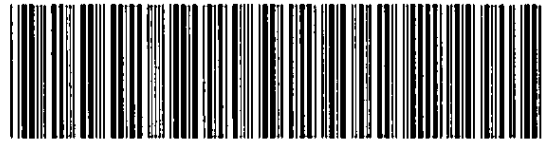
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## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Florida Rabbit Properties, Inc  
Name of Corporation

**DOCUMENT NUMBER:** P20000022108

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:

Marco Schoenrock

Name of Contact Person

Firm/Company

9067 Capistrano St N Unit 4503

Address

Naples, FL 34113

City/State and Zip Code

iwona@ctrgroup.cz

iwona @ CTR GROUP. CZ

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

For further information concerning this matter, please call:

Marco Schoenrock

Name of Contact Person

at (239) 738-0864

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

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.

- MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314  
CR2E045 (04/13)

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