

P20 000027227

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

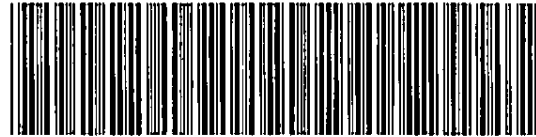
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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Change

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2021 JUN 10 AM 11:56
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

JUL 13 2021
A RAMSEY

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: THERMIDAS AMERICAS INC.
Name of Corporation

DOCUMENT NUMBER: P20000027227

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:

TRISHA BONILLA
Name of Contact Person

TTBCPA LLC
Firm/Company

935 21ST AVENUE N
Address

ST PETERSBURG FL 33704
City/State and Zip Code

TRISHABONILLA@TTBCPA.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

TRISHA BONILLA
Name of Contact Person at (305) 975-8010
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

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

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.

1. The name of the corporation: THERMIDAS AMERICAS INC.
2. The principal office address: 7912 SAILBOAT KEY BOULEVARD, SUITE 508
SOUTH PASADENA, FL 33707
3. The mailing address (if different): 935 21ST AVENUE N ST PETERSBURG FL 33704
4. Date of incorporation/qualification: MARCH 30 2020 Document number: P20000027227
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

KARO KUJANPAA

7912 SAILBOAT KEY BOULEVARD, SUITE 508

SOUTH PASADENA FL 33707

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

TRISHA BONILLA


935 21ST AVENUE N

ST PETERSBURG FL 33704

P.O. Box NOT acceptable

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.



Signature of an officer or director

KARO KUJANPAA

Printed or typed name and title

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.



Signature of Registered Agent

5292021

Date

If signing on behalf of an entity:

TRISHA BONILLA

Typed or Printed Name

*** 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 (04/13)

FILED
2021 JUN 10 AM 11:56
SECRETARY OF STATE
TALLAHASSEE, FL 32304