

P20000034923

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

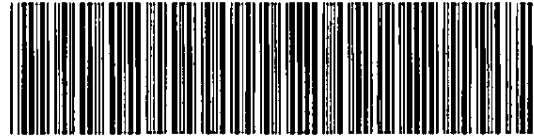
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FL

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Zubrick Magic, Inc
Name of Corporation

DOCUMENT NUMBER: P2000003-4923

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:

Christopher R Zubrick

Name of Contact Person

Zubrick Magic, Inc

Firm/Company

4604 49th Street N., Suite 1058

Address

St. Petersburg, FL 33709

City/State and Zip Code

contact@zubrickmagic.com

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

For further information concerning this matter, please call:

Christopher R Zubrick

Name of Contact Person

at (727)

313-0125

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: Zubrick Magic, Inc
2. The principal office address: 4604 49th Street N., Suite 1058, St. Petersburg, FL 33709
3. The mailing address (if different): N/A
4. Date of incorporation/qualification: 05/01/2015 Document number: P20000034923
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)

FL PATEL LAW PLLC

360 CENTRAL AVENUE, SUITE 800

SAINT PETERSBURG, FL 33701

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

Christopher R Zubrick

4604 49th Street N., Suite 1058

P.O. Box NOT acceptable

St. Petersburg, FL 33709

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.

Christopher R. Zubrick
Signature of an officer or director

Christopher R Zubrick, D.

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.*

Christopher R. Zubrick
Signature of Registered Agent

January 28, 2021

Date

If signing on behalf of an entity:

Christopher R Zubrick, D. of Zubrick Magic, Inc

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)

SECRETARY OF STATE
TALLAHASSEE, FL

2021 FEB -1 AM 8:15

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