P20 000092412

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11/05/21--01013--004 **35.00

COVER LETTER

TO:	Amendment Section Division of Corporations
SUBJ Name	ECT: LOTUS PROPERTY VENTURES, INC. of Corporation
DOC	UMENT NUMBER: P 20000092412
The en	nclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.
Please	return all correspondence concerning this matter to the following:
	DL BAER
Name	of Contact Person
LOTU	S PROPERTY VENTURES, INC.
Firm/	Company
5333 5	S.W. 75th Street, U128
Addro	SSS .
Gaine	sville, Florida 32608
City/S	State and Zip Code
	Carol.LPV21@gmail.com
E-ma	il address: (to be used for future annual report notification)
For fu	arther information concerning this matter, please call:
CARG	DL BAER Name of Contact Person at (352) 682-6474 Area Code & Daytime Telephone Number
	Name of Contact Person Area Code & Daytime Telephone Number
~ .	1. Cas an A. J.
Enclo	sed 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

CR2E045 (04/13)

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

statement of change is	submitted for a corporation	7,0502, 607,1508, or 617,1508, Florida Statutes, this organized under the laws of the State of Florida registered agent, or both, in the State of Florida.		
	poration: LOTUS PROPERT			
2. The principal office	address: 5333 SW 75th Street,	. U128, Gainesville, FL 32608		
3. The mailing address	(if different): SAME			
4. Date of incorporatio	n/qualification: 11/19/2020	Document number: P 20000092412		
5. The name and street		ered agent and registered office on file with the		
AND	ERSON REGISTERED AGEN	ITS, INC.		
625 E	625 E. TWIGGS STREET, SUITE 110			
TAMI	TAMPA, FL 33602			
(if changed):		d agent (if changed) and /or registered office		
	CAROL BAER			
5333 S.W. 75th Street, U128 P.O. Box NO1 acceptable				
Gaine	sville, FL 32608			
		street address of the business office of its registered agent,		
Such change was auth authorized by the boar	orized by resolution duly ac rd, or the corporation has be	dopted by its board of directors or by an officer so een notified in writing of the change.		
Canal	Balz	Carol Baer		
Signature of an o	officer or director	Printed or typed name and title		
I further agree to com of my duties, and I am document is being file	pointment as registered age ply with the provisions of a familiar with and accept th d merely to reflect a change notified in writing of this ch	ent and agree to act in this capacity. It statutes relative to the proper and complete performance we obligation of my position as registered agent. Or, if this in the registered office address, I hereby confirm that the lange.		
Caral	Barr	10/31/2021		
Signature of	Registered Agent	Date		
If signing on behalf of	fan entity:			
Typed or I	Printed Name			

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