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To:

Division of Corporations
Fax Number : (850)617-6380

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 Phone : (307)200-2803 Fax Number : (813)436-5206

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email	Address:				
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## REGISTERED AGENT CHANGE FUZZBOX SHARKS INC

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Estimated Charge	\$35.00

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## 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: <u>FUZZBOX SHARKS INC</u>
2. The principal office address:
3. The mailing address (if different):
4. Date of incorporation/qualification: 11/23/2020 Document number: P20000093043
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)
BITTAR, GREGORY A
9360 VEDRA POINTE LN
BOCA RATON, FL 33496
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Northwest Registered Agent LLC
7901 4th St N STE 300
P.O. Box NO Facceptable St. Petersburg, FL 33702
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.
Gregory A Bittar - President Signature of the officer of director Printed or typed name and little
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 If my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this locument 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.
Agrandure of Registered Agent Date
Agnafure of Jegistered Agent Date
f signing on behalf of an entity:
Taylor Newman
Typed or Printed Name  * * * FILING FEE: \$35.00 * * *