

P210000010754

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

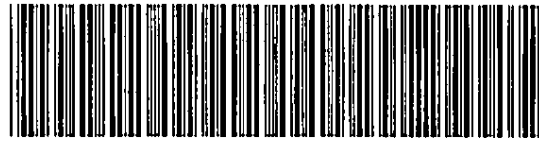
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2022 AUG -2 PM 3:00
SECRETARY OF STATE
TALLAHASSEE, FL

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: ICONIC PMO, INC.
Name of Corporation

DOCUMENT NUMBER: P21000010754

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:

Tonya Phyllisia Taylor

Name of Contact Person

ICONIC PMO, INC.

Firm/Company

3001 Aloma Ave.

Address

Winter Park, FL 32792

City/State and Zip Code

cco@iconicpmo.org

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

For further information concerning this matter, please call:

Tonya Phyllisia Taylor

Name of Contact Person

at (312) 998-7998

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: ICONIC PMO, INC.
2. The principal office address: 1591 Randolph St Deltona, FL 32725
3. The mailing address (if different): 3001 Aloma Ave. Winter Park FL 32792
4. Date of incorporation/qualification: 01/27/2021 Document number: P21000010754
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)

TONYA PHYLLISIA TAYLOR

3479 NE 163RD ST #1099

NORTH MIAMI BEACH, FL 33160

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

TONYA PHYLLISIA TAYLOR

1591 Randolph St.

P.O. Box NOT acceptable

Deltona, FL 32725

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.

T. Phyllisia Taylor

Signature of an officer or director

Tonya Phyllisia Taylor

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.

T. Phyllisia Taylor

Signature of Registered Agent

July 25, 2022

Date

If signing on behalf of an entity:

Tonya Phyllisia Taylor

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)

2022 AUG -2 PM 3:00
SECRETARY OF
STATE
TALLAHASSEE, FL

FILED