P21000015614

	(Requestor's Name)
	(Address)
····	(Address)
	(City/State/Zip/Phone #)
DICk it	322 MAIL MAIL
	(Business Entity Name)
	(i)ocument Number)
Certified Copies	Certificates of Status
Special Instruct o	is to Filing Officer:

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MAY 2 1 2021 I ALBRITTON CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee FL 32301

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195					
REFERENCE : 822305 8345668					
AUTHORIZATION : T X 80					
COST LIMIT : \$ 35.00					
ORDER DATE : May 19, 2021					
ORDER TIME : 11:12 AM					
ORDER NO. : 822305-005					
CUSTOMER NO: 8345668					
CHANGE OF AGENT					
NAME: JG BANIS COMPANY, INC.					
WANTE OF BRIVES CONTRIVE, INC.					
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:					
CERTIFIED COPY XX PLAIN STAMPED COPY					
CONTACT PERSON: Alexxis Weiland EXT#					
EXAMINER:					

COVER LETTER

TO:	Amendment Section Division of Corporations				
SUBJ Name	JG BANIS COMPANY, INC. of Corporation				
DOC	UMENT NUMBER: P21000015674				
The er	nclosed Statement of Change of Registere	d Office/Agent and fee are submitted for filing.			
Please	return all correspondence concerning thi	s matter to the following:			
RAFA	EL BANIS				
	of Contact Person NIS COMPANY, INC.				
	Company HAYS ST				
Addre:	ss Ahassee, fl. 32301				
City/S	tate and Zip Code RBANIS@BANISTRADITI	ON.COM			
E-mai	l address: (to be used for future annua	l report notification)			
For fur	ther information concerning this matter,	please call:			
RAFAI	EL BANIS	378 5008			
	Name of Contact Person	at (617) 378 5008 Area Code & Daytime Telephone Number			
Enclos	ed is a \$35.00 check made payable to the	Department of State.			
	Mailing Address: Amendment Section	Street Address: Amendment Section			
	Division of Corporations	Division of Corporations			
	P.O. Box 6327 The Centre of Tallahassee				

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

CR2E045 (04/13)

Tallahassee, FL 32314

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

statement of ch	e provisions of sections 607.0502, 61 cange is submitted for a corporation o	organized under the la	tws of the State of	FLORIDA	
in ord	er to change its registered office or r		oth, in the State of	Florida.	
1. The name of	the corporation:	r, INC.			
	office address: 1201 HAYS ST, TAL	LAHASSEE, FL 3230	01		
3. The mailing	address (if different):309 LEXINGTO	ON ST, AUBURNDAL	E, MA 02466	· · · · · · · · · · · · · · · · · · ·	
4. Date of incorporation/qualification: 2/11/2021 Document number: P21000015					
5. The name and Florida Depar	d street address of the current register rtment of State: (If resigned, enter res	red agent and registere	ed office on file w	rith the	
	RAFAEL BANIS			_	
	1201 HAYS ST			2021	
	TALLAHASSEE	FL	32301	2021 HAY 20	
6. The name and (if changed):	street address of the new registered	agent (if changed) and	d /or registered of	20 A	
	Corporation Service Company			171 ₂₁ 9	
	1201 Hays Street			- E	
		Box NOT acceptable		_	
	Tailahassee	FL	32301	_	
The street addre	ss of its registered office and the str be identical.	eet address of the bu	siness office of it	s registered agent,	
Such change wa authorized by th	s authorized by resolution duly adop e board, or the corporation has been	pted by its board of d i notified in writing o	lirectors or by an of the change.	officer so	
		RAFAEL BANIS	_	PRESIDENT	
	POI an officer or director	Printe	d or typed name and tit	le	
I hereby accept I further agree to of my duties, and accument is bein corporation has	the appointment as registered agent to comply with the provisions of all s I I am familiar with and accept the to filed merely to reflect a change in been notified in writing of this chan Service Company	and agree to act in t tatutes relative to the obligation of my posi the registered office ge.	his capacity. e proper und com tion as registered e address, I hereb	plete performance l agent. Or, if this y confirm that the	
By:	Justide & Folimen	05/20/2021			
_	sture of Registered Agent		Date		
If signing on beh	alf of an entity:				
Тут	ocd 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)