Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H23000416580 3)))



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To:

Division of Corporations

Fax Number

: (850)617-6380

From:

: REGISTERED AGENT SOLUTIONS INC Account Name

Account Number : I20100000062

: (888)705-7274

Fax Number

: (888)706-7274

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

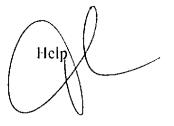
EMALL AUUTESS:	ddress:
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## REGISTERED AGENT CHANGE ONE PARKING 736, INC.

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$35.00

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Corporate Filing Menu



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## **COVER LETTER**

TO:

Amendment Section Division of Corporations

15129570210

SUBJECT: One Parking 736	, Inc.	
Name of Corporation		
DOCUMENT NUMBER: P210000	22545	
The enclosed Statement of Change of Registered O	office/Agent and fee are submitted for filing.	
Please return all correspondence concerning this ma	atter to the following:	
Lori Whalen	چون	2023 DEC -6 AH 9: 44
Name of Contact Person	<del></del>	E(
Registered Agent Solutions, Inc.		
Firm/Company	<del></del>	့ ကို
Corporate Center One, 5301 Southwest Pkwy, Ste 400	ري رين	丑
Address		` جب َ
Austin, Texas 78735		
City/State and Zip Code	<del></del>	
E-mail address: (to be used for future annual re	•	
Lori Whalen	at ( 888 ) 705-7274	
Name of Contact Person	at ( 888 ) 705-7274  Area Code & Daytime Telephone Nu	imber
Enclosed is a \$35.00 check made payable to the De	epartment of State.	
Mailing Address: Amendment Section	Street Address: Amendment Section	
Division of Corporations P.O. Box 6327	Division of Corporations The Centre of Tallahassee	
r.O. Dox 0327	THE CERRIC OF TAHAHASSEC	

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 cha	provisions of sections 607.0 nge is submitted for a corpo r to change its registered of	oration organizea	under the lay	vs of the State of _	Florida	
1. The name of t	the corporation: One Particle address: 3460 NE	arking 736, I	nc.			<del></del>
3. The mailing a	ddress (if different): 477 S.	ROSEMARY A	ZENUE SUIT	E #216 WEST PA	ALM BEACH,	FL 33401
4. Date of incorp	oration/qualification: 3/3/	2021	_ Document i	number: P2100	0022545	
	street address of the curren tment of State: (If resigned,		and registere	d office on file wi	ith the	
	TRAC - THE REG	SISTERED A	AGENT C	OMPANY		
	236 EAST 6TH AVE	NUE			-	
	TALLAHASSEE		FL	32303	-	
6. The name and (if changed):	street address of the new re	-	-	d/or registered of	fice Til.	2023 DEC -6
	2894 Remington			·	ASS	= 5
	Tallahassee	P.O. Box NO FL		3	E. Fi.	49:44
The street addre	ss of its registered office a be identical.	nd the street add	ress of the bu	siness office of it	s registered a	igent,
Such change wa authorized by th	s authorized by resolution c board, or the corporation	duly adopted by has been notifie	its board of o d in writing o	firectors or by an of the change.	officer so	
	Wright	Jac	clyn Wrigh	t ed or typed name and til	Authorized	Person
l further agree t of my duties, an docúment is beil	the appointment as registe, o comply with the provision of I am familiar with and ac ny filed merely to reflect a been notified in writing of	ns of all statutes cept the obligati change in the re	ree to act in relative to th on of my pos gistered offic	this capacity. e proper and con ition as registered e address, I hereb	aplete perform d agent. Or by confirm the	nance if this at the
Mo	الله مزوم	1	2/6/2023			
Sign	nature of Registered Agent			Date		<del></del>
If signing on bel	half of an entity:					
	r, Assistant Secretary	·····				
1)	ped 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)