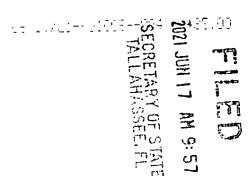
P21000036292

(Requestor's Name)							
(Address)							
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PICK-UP WAIT MAIL							
(Business Entity Name)							
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Considerations to Filips Officer							
Special Instructions to Filing Officer:							
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COVER LETTER

TO:	Amendment Section Division of Corporations	
SUBJI Name (ECT: CGM Land Inc of Corporation	
DOCU	JMENT NUMBER: P21000036292	
The en	closed Statement of Change of Registere	d Office/Agent and fee are submitted for filing.
Please	return all correspondence concerning this	s matter to the following:
Colin G	3 Murphy	
Name o	of Contact Person	
CGM L	and Inc	
Firm/C	Company	
4700 M	fillenia Blvd Suite 175 PMB 94252	
Addres	ss	
Orlando	o F1. 32839	
City/St	ate and Zip Code	
	colingmurphy@gmail.com	
E-mail	l address: (to be used for future annua	l report notification)
For fur	ther information concerning this matter.	please call:
Colin M	· · ·	at (727)7937547 Area Code & Daytime Telephone Number
	Name of Contact Person	Area Code & Daytime Telephone Number
Enclose	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
	Tallahassee, FL 32314	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 cha	provisions of sections 607. ange is submitted for a corp	poration organize	d under the laws o	f the State of Flo	orida			
2. The principal office address: 4700 Millenia Blvd, Suite 175 PMB 94252, Orlando FL 32839 3. The mailing address (if different): 4. Date of incorporation/qualification: 4/14/2021 Document number: P21000036292 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) Murphy, Colin G 4700 Millenia Blvd, Suite 175 PMB 94252 Orlando FL 32839 Weiss, Kenyon Weiss, Kenyon 685 MAIN STREET, SUITE C P.O. Box NOT acceptable SAFETY HARBOR, FL 34695 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: Dereby accept the appointment as registered agent and agree to act in this capacity. Printed or typed name and talk			-	d agent, or both, in	the State of Flo	rida.			
3. The mailing address (if different): 4. Date of incorporation/qualification: 4/14/2021 Document number: P21000036292 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) Murphy, Colin G 4700 Millenia Blvd, Suite 175 PMB 94252 Orlando FL 32839 Orlando FL 32839 Weiss, Kenyon Weiss, Kenyon Weiss, Kenyon G85 MAIN STREET, SUITE C P.O. Box NOT acceptable SAFETY HARBOR, FL 34695 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. Colin Murphy, President Timited or typed name and take I purphy accept the apphintment as registered agent and agree to act in this capacity. Colin Murphy, President Timited or typed name and take I purphy accept the apphintment as registered agent and agree to act in this capacity. Colin Murphy, President Timited or typed name and take I purphy accept the apphintment as registered agent and agree to act in this capacity. Colin Murphy, President Timited or typed name and take I purphy accept the apphintment as registered agent and agree to act in this capacity. Supported to comply with the provisions of all statutes relative to the proper and complete performance of my dulies, and I am familiar with and accept the obligation of my position as registered agent. Dr. 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. G1 13 2221 Supported of Registered Agent If signing on behalf of an entity:				DVID 0.1252 Orland	do EL 32830				
4. Date of incorporation/qualification: 4. Date of incorporation/qualification: 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) Murphy, Colin G 4700 Millenia Blvd, Suite 175 PMB 94252 Orlando FL 32839 6. The name and street address of the new registered agent (if changed) and /or registered office of its registered office of its registered agent (if changed) and /or registered office of its registered agent (if changed) and /or registered 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. Colin Murphy, President Printed or typed name and title I hereby accept the apply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obtigation of my position as registered agent. Or if this corporation has been plated in writing of this change. 6 13 2021 Sugmand of Registered Agent If signing on behalf of an entity:	2. The principal	office address: 4700 Miles		7 MD 94232, Olland					
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A700 Millenia Blvd, Suite 175 PMB 94252 Orlando FL 32839 Meiss, Kenyon Weiss, Kenyon O85 MAIN STRIET, SUITE C P.O. Box NOT acceptable SAFETY HARBOR, FL 34695 The street address of its registered office and the street address of the business office of its registered agent, as changed will be identicall. Such changes 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. Colim Murphy, President Signature of an officer of director Printed or typed name and title I hereby accept the appointment as registered agent and agree to act in this capacity, if 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. Thereby confirm that the corporation has been positifed in writing of this change. Signature of Registered Agent If signing on behalf of an entity:				nt and registered of	fice on file with	the			
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	Tv	sped or Printed Name							

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