P21 0000 39872

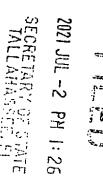
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COVER LETTER

TO: Amendment Section Division of Corporations	
SUBJECT: Name of Corporation	
DOCUMENT NUMBER: P21000039872	
The enclosed Statement of Change of Registered Office	ec/Agent and fee are submitted for filing.
Please return all correspondence concerning this matte	r to the following:
Perry Mann	
Name of Contact Person P. E. Mann & Co. Inc.	
Firm/Company 5077 Fruitville Road Suite 109-145	
Address Sarasota, FL 34232	
City/State and Zip Code	
E-mail address: (to be used for future annual report	rt notification)
For further information concerning this matter, please	call:
Perry Mann	941 259-21(X) at ()
Name of Contact Person	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

Amendment Section Division of Corporations The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Street Address:

CR2E045 (04/13)

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

statement of cha	nge is submitted for a corpora	2, 617.0302, 607.1308, or 617.1308, Piorida Matul ation organized under the laws of the State of <mark>Florida</mark> we or registered agent, or both, in the State of Florid	<u> </u>
1. The name of	the corporation:	Co. Inc. Road Suite 109-145 Sarasota, FL 34232	 _
2. The principal	office address:	Road Suite 109-145 Sarasota, F1.34232	
3. The mailing a	address (if different):	150 (00000) (0177)	
4. Date of incor	poration/qualification: +26/21	P21000039872Document number:	<u> </u>
	d street address of the current returnent of State: (If resigned, en	egistered agent and registered office on file with the iter resigned)	:
	Perry Mann		
	4774 Sacra Court	SECF TA	2021 JUI.
	Sarasota, FL 34232		
6. The name an (if changed):	d street address of the new regi	istered agent (if changed) and /or registered office,	2 PH I
	Perry Mann		 ∾
	5077 Fruitville Road Suite 109-	•	2)
	Sarasota, FL 34232	P.O. Box NOT acceptable	
The street addr	ess of its registered office and be identical.	the street address of the business office of its regi	stered agent,
Such change wanthorized by t		ly adopted by its board of directors or by an office as been notified in writing of the change.	er so
Ku	y Man	Perry Mann President	
/ Signatu	e of an officer of director	Printed or typed name and lifte	
ी further agree। of my duties, ar document is he	the appointment as registered to comply with the provisions and I am familiar with and accepting filed merely to reflect a choos been putified in writing of the	d agent and agree to act in this capacity. of all statutes relative to the proper and complete ept the obligation of my position as registered age, lange in the registered office address. I hereby con is change.	performance nt. Or, if this afirm that the
Kun	1 hr	6/29/21	
Sin	hature of Registered Agent	TxAc	
If signing on the	half of an entity:		
Perry Mann			
1	yped or Printed Name		

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