

P2200015990
Florida Department of State
Division of Corporations
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To: Division of Corporations
Fax Number : (850)617-6380

From: Account Name : DICKINSON WRIGHT PLLC
Account Number : I20190000026
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Fax Number : (844)670-6009

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

Email Address: _____

REGISTERED AGENT CHANGE
03022022 INC.

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$43.75

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COVER LETTER

((H23000402156 3))

TO: Amendment Section
Division of Corporations

SUBJECT: Change of Registered Agent and Change of Corporate Address
Name of Corporation _____

DOCUMENT NUMBER: P22000015990

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:

Bryan Cohen
Name of Contact Person _____

Firm/Company
1314 E. Las Olas Blvd., #1084
Address
Fort Lauderdale, FL 33301
City/State and Zip Code

sr84@att.net
E-mail address: (to be used for future annual report notification) _____

For further information concerning this matter, please call:

Bryan Cohen at (954) 610-9748
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

Street Address:
Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

CR2E045 (04/13)

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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: 03022022 Inc.
- 2. The principal office address: 1314 E. Las Olas Blvd., #1084
Fort Lauderdale, FL 33301
- 3. The mailing address (if different): _____
- 4. Date of incorporation/qualification: 03/02/2022 Document number: P22000015990
- 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)

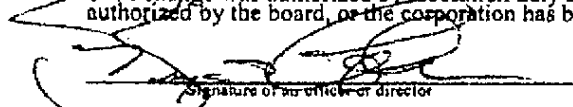
Mark S. Schecter
101 NE 3rd Ave, Suite 1250
Fort Lauderdale, FL 33301

- 6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
- Charles D. Brecker, Esq.
Dickinson Wright PLLC
P.O. Box NOT acceptable
350 E. Las Olas Blvd., Suite 1750, Fort Lauderdale, FL 33301

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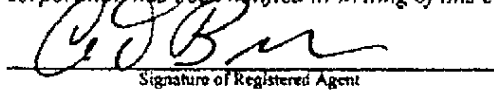
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

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.


 Signature of an officer or director

Bryan Cohen, V
 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.


 Signature of Registered Agent

09/22/2023
 Date

If signing on behalf of an entity:
CHARLES D. BRECKER
 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
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