

P220000 17384

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

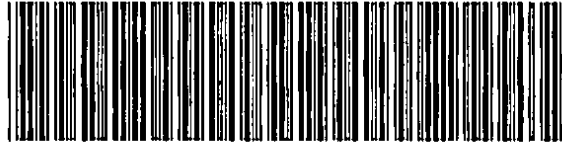
(Business Entity Name)

(Document Number)

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2022 APR 25 AM 6:30

SECRETARY OF STATE
TALLAHASSEE, FL

A. BUTLER
JUN 14 2022

**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: First Base Logistics inc
2. The principal office address: 16401 sw 294 st
Homestead fl 33033
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 2/17/2022 Document number: P22000017384
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)

Airam L Bulte

30111 sw 155 av

Homestead FL 33033

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Noslen E Bulte

16401 sw 294 st

P.O. Box NOT acceptable

Homestead FL 33033

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.

N Bulte
Signature of an officer or director

Noslen E Bulte President/Owner

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.

N Bulte
Signature of Registered Agent

03/11/2022

Date

If signing on behalf of an entity:

Noslen E Bulte

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
CR2E045 (04/13)

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