P22000211

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COVER LETTER

TO:

Amendment Section Division of Corporations

SUBJECT: IHTS MANAGEMENT, INC. Name of Corporation	
DOCUMENT NUMBER: P22000022110	
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:
ROBERT F. TACHER, ESQ.	
Name of Contact Person	
PETERSON BERNARD	
Firm/Company	
707 SE 3RD AVENUE SUITE 500	
Address	
FORTLAUDERDALE, FLORIDA 33316	
City/State and Zip Code	
ROBERT.TACHER@PETER	· · · · · · · · · · · · · · · · · · ·
E-mail address: (to be used for future annual	l report notification)
For further information concerning this matter, p	please call:
ROBERT TACHER	at (954)763-3200 X 1106 Area Code & Daytime Telephone Number
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	Street Address: Amendment Section Division of Corporations 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	nge is submitted for a corporation org	iso2, 607.1508, or 617.1508, Florida Sit ganized under the laws of the State of <u>Fl</u> ristered agent, or both, in the State of Flo	LORIDA
1. The name of t	the corporation: IHTS MANAGEMEN	T, INC.	
2. The principal DAVIE, FLORII	office address: 8958 WEST STATE R	OAD 84 # 154	
3 The mailing a	ddress (if different): N/A		
	poration/qualification: 3/9/22	Document number: P22000022	110
5. The name and		d agent and registered office on file with gned)	ı the
	BERNARD SINGER		
	16389 Cabernet Drive		
	Delray Beach, Florida 33446		
6. The name and (if changed):	d street address of the new registered a	agent (if changed) and /or registered offic	ce
	Robert F. Tacher		
	707 SE 3rd Avenue Suite 500		
	P.O.	Box NOT acceptable	
	Fort Lauderdale, Florida 33316		
The street addr	ess of its registered office and the str be identical.	eet address of the business office of its	registered agent,
Such change wanthorized by the	as authorized by resolution duly adop he board or the corporation has been	nted by its board of directors or by an of notified in writing of the change.	fficer so
1		MICHAEL PERLYAN	•
5	re of an officer of director	Printed or typed name and title	28
I further agree of my duties, ar document is be	the appointment as registered agent to comply with the provisions of all s nd I am familiar with and accept the ing filed merely to reflect a change in s been notified in writing of this char	tatutes relative to the proper and comp obligation of my position as registered n the registered office address, I hereby	1 (C) (C)
	gnature of Registered Agent	2/21/24 Date	2. P
`		2-4	12: (
Robe	chalf of an entity:		15. C.

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE