

P2200002104B

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TO: Amendment Section
Division of Corporations

SUBJECT: NEW WORLD BUSINESS MGMT INC
Name of Corporation

DOCUMENT NUMBER: 122000024043

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:

CELIA Z KAHN

Name of Contact Person
NEW WORLD BUSINESS MGMT INC

Firm/Company
2822 54TH AVE S, NO 333

Address
ST PETERSBURG, FL 33712

City/State and Zip Code
CELIAZ@ME.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

CELIA Z KAHN at (818) 512-3567
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

**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: NEW WORLD BUSINESS MGMT, INC
2. The principal office address: 5215 27TH AVE S, GULFPORT, FL 33707

3. The mailing address (if different): 2822 54TH AVE S, NO333, ST PETERSBURG, FL 33712

4. Date of incorporation/qualification: MARCH 16, 2022 Document number: P22000024043

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)

ZENBUSINESS INC

336 E COLLEGE AVE, SUITE 301

TALLAHASSEE, FL 32301

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

CELIA Z KAHN

5215 27TH AVE S

P.O. Box NOT acceptable

GULFPORT, FL 33707

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 officer or director

CELIA Z KAHN
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

MARCH 25 2023
Date

If signing on behalf of an entity:

CELIA Z KAHN

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