## P22000090115

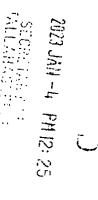
| (Re                                     | questor's Name)   |             |
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| (Cit                                    | y/State/Zip/Phone | e #)        |
| PICK-UP                                 | ☐ WAIT            | MAIL        |
| (Bu                                     | siness Entity Nan | ne)         |
| (Document Number)                       |                   |             |
| Certified Copies                        | _ Certificates    | s of Status |
| Special Instructions to Filing Officer: |                   |             |
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2804 Gateway Oaks Drive #100 Sacramento, CA 95833 Phone (800)533-7272 Fax (800)603-5868

## REFERENCE # MUST BE ON INVOICE TO BE PAID

## NUMBER PAGES:

REFERENCE:

Vanessa Calhoun

1885379

AE:

Date: December 23, 2022

TO: Florida Department of State

Division of Corporations

PO Box 6327

Tallahassee, FL 32314

FAX: 850-687-6381

PLEASE PERFORM THE FOLLOWING:

**UPEKKHA INC.** 

File Change of Registered Agent

IN: FL

PLEASE RETURN:

PLEASE CALL (800)533-7272 ATTN: Vanessa Calhoun TO CONFIRM FILING RESULTS

CALL IMMEDIATELY IF YOU HAVE ANY QUESTIONS OR THE DEADLINE WILL NOT BE MET (800)533-7272

1960

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS $\overline{\phantom{a}}$

| statement of ch                          | e provisions of sections 607,0302, 617,0302, 607,1308, or 617,1308, Florida Statutes, this mange is submitted for a corporation organized under the laws of the State of FU.  The state of Florida.   |
|--|---|
|  | The corporation: UPEKKHA INC.   |
| 2. The principa                          | d office address: 3807 SUNSET COVE DR PORT ORANGE, FL 32129   |
| 3. The mailing                           | address (if different):   |
| -  | poration qualification: 12/05/2022 Document number: P22000090115  |
| 5. The name an                           | d street address of the current registered agent and registered office on file with the atment of State: (If resigned, enter resigned)  |
|  | ROCKET LAWYER CORPORATE SERVICES LLC  |
|  | 279 W. CROGAN STREET & TRS  |
|  | LAWRENCEVILLE, FL 30046   |
| 6. The name and (if changed):            | d street address of the new registered agent (if changed) and /or registered office  Rocket Lawyer Corporate Services LLC   |
|  | 155 Office Plaza Drive, 1st Floor   |
|  | P.O. Box NOT acceptable   |
|  | Tallahassee, FL 32301   |
|  | ss of its registered office and the street address of the business office of its registered agent, be identical.  |
| Such change wa<br>authorized by th       | s authorized by resolution duly adopted by its board of directors or by an officer so e board, or the corporation has been notified in writing of the change.   |
| Signal of                                | Town of the first of the control of |
| I hereby accept to<br>I further agree to | the appointment as registered agent and agree to act in this capacity.  Occomply with the provisions of all statutes relative to the proper and complete performance of I am familiar with and accept the obligation of my position as registered agent. Or, if this by filed merely to reflect a change in the registered office address. Thereby confirm that the been notified in writing of this change.  |
| Palmi Ville Sive                         | 12.19.2022  Thate   |
| If signing on beh                        |   |
| Edna Perry, As                           | sst. Secretary_Rocket Lawyer Corporate Services LLC   |

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT DE STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, UALLABASSEF, FL 32334
CR21945 (64/13)