## 923000018698

(Requestor's Name)	
(Address)	<u> </u>
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT	ИAIL
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	. <u>-</u>

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## **COVER LETTER**

TO:

TO: Amendment Section Division of Corporations	
SUBJECT: CADENZA MARKETING, INC.	
Name of Corporation	
DOCUMENT NUMBER: P23000018698	
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:
Samantha Jackson	
Name of Contact Person	
Meriam Corporate Services, Inc.	
Firm/Company	
PO Box 52588	
Address	<del></del>
Mesa AZ 85208	
City/State and Zip Code	- <del></del>
meriamfinancial@gmail.com	
E-mail address: (to be used for future annual	report notification)
For further information concerning this matter, p	olease call:
Samantha Jackson	31.6.720 \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
Name of Contact Person	at (720 ) 318.8456 Area Code & Daytime Telephone Number
Enclosed is a \$35.00 check made payable to the	Department of State.
Mailing Address: Amendment Section	Street Address: Amendment Section
Division of Corporations	Division of Corporations
P.O. Box 6327	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 change is submitted for a corporatio	617.0502, 607.1508, or 617.1508, Florida Statutes, this on organized under the laws of the State ofFLORIDA	
· · · · · · · · · · · · · · · · · · ·	or registered agent, or both, in the State of Florida.	
The name of the corporation:  2. The principal office address:  CADENZA MARKETING, INC.  12724 GRAN BAY PARKWAY WEST STE 410 JACKSONVILLE FL 322		
3. The mailing address (if different):		
	23 Document number: P23000018698	
	istered agent and registered office on file with the	
ASHLEY CHANEY	~ · ·	
8300 NW 53RD ST STE 310	PH	
DORAL, FL 33126	5: 2	
6. The name and street address of the new registe (if changed):	ered agent (if changed) and /or registered office	
12724 GRAN BAY PARKWAY	WEST STE 410	
JACKSONVILLE FL 32258	P.O. Box NOT acceptable	
The street address of its registered office and thas changed will be identical.	e street address of the business office of its registered agent,	
	adopted by its board of directors or by an officer so been notified in writing of the change.	
Mill d'aut	ASHLEY CHANEY, PRESIDENT	
I hereby accept the appointment as registered a I hereby accept the appointment as registered a I further agree to comply with the provisions of of my duties, and I am familiar with and accept document is being filed merely to reflect a chan copporation has been notified in writing of this	all statutes relative to the proper and complete performance the obligation of my position as registered agent. Or, if this see in the registered office address, I hereby confirm that the	
Mak had	04/24/2023	
Signature of Registered Agent	Date	
If signing on behalf of an entity:		
Typed or Printed Name	_	

Make checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

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

CR2E045 (04/13)