P23000026265

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





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B. McKnight 9/6/23

2023 SEP -6 PH 3: 17

pm 9/4/23

COVER LETTER

TO:

TO: Amendment Section Division of Corporations		
SUBJECT: City of Rellik, Inc. Name of Corporation		
DOCUMENT NUMBER: P230002626.5		
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:		
Marchell D. Scott Name of Contact Person		
Firm/Company 3354 NW 17 th Street Address		
Laudechill, FL. 33311 City/State and Zip Code Collection of March Com		
E-mail address: (to be used for future annual report notification)		
For further information concerning this matter, please call:		
Name of Contact Person at (305) 761-1290 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 The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

CR2E045 (04/13)

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

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, the statement of change is submitted for a corporation organized under the laws of the State of $\frac{1}{1000}$ M.	. 1
in order to change its registered office or registered agent, or both, in the State of Florida.	
1. The name of the corporation: City of Kellik Inc.	
2. The principal office address: 3334 NW 177 STRUCT	
3. The mailing address (if different): 3354 NW 17th Street Lauderhill	, FL. 33311
4. Date of incorporation/qualification: $3/30/23$ Document number: 923000	26265
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)	
Marchelle D. Scott Es :	· 3
1571 NW 33rd Ave	
Lauderhill, FZ 33311	ا جن الله الله الله الله الله الله الله الل
6. The name and street address of the new registered agent (it changed) and for registered office (i)	
(if changed):	<u>ఆ</u> —
Marchelle B. Scott	-7
3354 NW 17th Street	
Lauderhill, Florida 33311	
The street address of its registered office and the street address of the business office of its registere as changed will be identical.	xd agent,
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.	
Marchelle D. Scott	Pundat
Signature of all Officer of director Printed or typed name and title	7-1-60 2.00
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 per of my duties, and I am familiar with and accept the obligation of my position as registered agent. I document is being filed merely to reflect a change in the registered office address, I hereby confirm corporation has been notified in writing of this change.	formance Or, if this 1 that the
Signature of Registered Agent 8 2 1 2 0 2 3	
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, TALLAHASSEF, FL 32314

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