

P230000052745

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

(Business Entity Name)

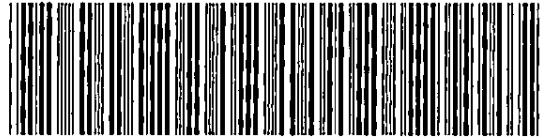
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TALLAHASSEE, FLORIDA

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: THRIVE TECH SERVICES INC.
Name of Corporation

DOCUMENT NUMBER: 923000052745

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:

JESS FORD
Name of Contact Person

THRIVE TECH SERVICES INC.
Firm/Company

215 N. WASHINGTON AVE
Address

CLEARWATER FL 33755
City/State and Zip Code

JESS@THRIVETECHSERVICES.COM
E-mail address: (to be used for future annual report notification)

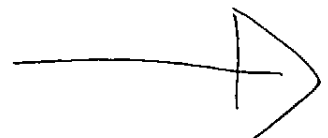
For further information concerning this matter, please call:

JESS FORD at (917) 301 8992
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: THRIVE TECH SERVICES INC.
2. The principal office address: 215 N WASHINGTON AVE
CLEARWATER, FL 33755
3. The mailing address (if different): _____
4. Date of incorporation/qualification: JULY 17, 2023 Document number: P2300052745
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)

~~JESSICA FORD~~ REPUBLIC REGISTERED AGENT
~~1150 NW 72ND AVE~~ LLC
~~TOWER 1, STE 455~~
~~MAMI, FL 33126~~

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

JESSICA FORD
215 N. WASHINGTON AVE
P.O. Box NOT acceptable
CLEARWATER FL, 33755

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 an officer or director

JESSICA FORD

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

JULY 11, 2024

Date

If signing on behalf of an entity:

JESSICA FORD

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
CR2E045 (04/15)