## P240000 2160360

(Re	equestor's Name)
(Ac	ddress)
(Ac	ddress)
(Ci	ty/State/Zip/Phone #)
PICK-UP	WAIT MAIL
(Bu	isiness Entity Name)
(Do	ocument Number)
Certified Copies	_ Certificates of Status
Special Instructions to	Filing Officer:
	J HORNE
	J. HORNE JUL 17 2024
<del></del> -	

Office Use Only



000431312830

06/17/24--01005--009 \*\*35.00

2025 July 177 (17) 6: 09

## **COVER LETTER**

TO: Amendment Section Division of Corporations
SUBJECT: Catalypics of TNC. Name of Corporation
DOCUMENT NUMBER: P24000 26036
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:
Jessica McGlyW  Name of Contact Person  Catalypics, INC.  Firm/Company  Address  St. Augushive, FL 32084  City/State and Zip Code  Jess. McG-Lync Catalypics. com  E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Je SSICA MCG-YW at (202), 664-4245  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

CR2E045 (04/13)

## 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 LOCICO in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: CatalyNiCS g INC
2. The principal office address: 178 SUNSET CIRCLE N  St. Augusking, FL 32080
3. The mailing address (if different): 2800 N 6 1 St. UNIT 1, PMB 902, St. Agn
4. Date of incorporation/qualification: 4/10/24 Document number: βλ4000 26036
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)
33 ATLANTICOAK CIRCLE ANTA
st. Nyuskine Beach, FL 32080
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Jessica McG/W
178 SUNSET CIRCLE N
St Algustine, Fl. 32084
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.
Jessica McGleyn Jessica McGlyn Printed or typed name and wille
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.
Alexand Miller June 10, 2024 Signature of Registered Agent June 10, 2024
If signing on behalf of an entity:
Jessica McGyW  Typed or Printed Name

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