

P26908

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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2021 JAN 19 PM 12:59
SECRETARY OF STATE
TALLAHASSEE, FL

2/26/21

COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: Oreis, Inc.

Name of Corporation

DOCUMENT NUMBER: P26908

The enclosed Amendment and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Bruce R Abernethy, Jr

Name of Contact Person

Bruce R Abernethy Jr PA

Firm/Company

130 S Indian River Dr, #201

Address

Fort Pierce, FL 34950

City/State and Zip Code

hellosue@ymail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Bruce R Abernethy Jr

at (772) 489-4901

Name of Contact Person

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- ☒ \$35 Filing Fee ☐ \$43.75 Filing Fee & Certificate of Status ☐ \$43.75 Filing Fee & Certified Copy ☐ \$52.50 Filing Fee, Certificate of Status & Certified Copy

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

PROFIT CORPORATION
APPLICATION BY FOREIGN PROFIT CORPORATION TO FILE AMENDMENT TO APPLICATION FOR
AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA
(Pursuant to s. 607.1504, F.S.)

FILED

SECTION I
(1-3 MUST BE COMPLETED)

2021 JAN 19 PM 12: 59

SECRETARY OF STATE
TALLAHASSEE, FL

P26908

(Document number of corporation (if known))

1. Oreis, Inc.
(Name of corporation as it appears on the records of the Department of State)
2. New York 3. 11-15-1989
(Incorporated under laws of) (Date authorized to do business in Florida)

SECTION II
(4-7 COMPLETE ONLY THE APPLICABLE CHANGES)

4. If the amendment changes the name of the corporation, when was the change effected under the laws of its jurisdiction of incorporation? _____
5. _____
(Name of corporation after the amendment, adding suffix "corporation," "company," or "incorporated," or appropriate abbreviation, if not contained in new name of the corporation)

(If new name is unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida) _____

6. If the amendment changes the period of duration, indicate new period of duration.

(New duration)

7. If the amendment changes the jurisdiction of incorporation, indicate new jurisdiction.

(New jurisdiction)

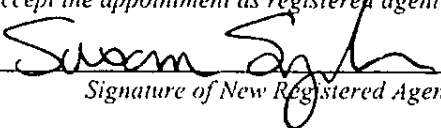
8. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent Susan Snyder
615 SW Barbuda Bay
(Florida street address)

New Registered Office Address: Port St. Lucie, Florida 34986
(City) (Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.


Signature of New Registered Agent, if changing

9. If the amendment changes person, title or capacity in accordance with 607.1504 (4), indicate that change:

<u>Title/ Capacity</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
PD	Susan Snyder	615 SW Barbuda Bay	<input checked="" type="checkbox"/> Add
		Port St. Lucie, FL 34986	<input type="checkbox"/> Remove
VPD	Donna Lapi	135 Camino Del Rio	<input checked="" type="checkbox"/> Add
		Port St. Lucie, FL 34952	<input type="checkbox"/> Remove
VPD	Victoria Swanson	4219 Peacock Way	<input checked="" type="checkbox"/> Add
		Knoxville, TN 37914	<input type="checkbox"/> Remove
P	Joan Serio	7728 Wexford Way	<input type="checkbox"/> Add
		Port St. Lucie, FL 34986	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

10. Attached is a certificate or document of similar import, evidencing the amendment, authenticated not more than 90 days prior to delivery of the application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the laws of which it is incorporated.

Susan Snyder

(Signature of a director, president or other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary)

Susan Snyder

(Typed or printed name of person signing)

President

(Title of person signing)

FILING FEE \$35.00