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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 : (614)280-3338 Fax Number : (954)208-0845

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:_

REGISTERED AGENT CHANGE 1000 HIGHWAY 98 EAST CORP.

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STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

| statement of ch | provisions of sections 607.050, ange is submitted for a corporal | tion organized und | der the laws | of the State of | f Florida | |
|--|---|--|-----------------------|---|--------------------|--|
| in ord | er to change its registered office | or registered age | mt, or both, | in the State of | Florida, | |
| · 1. The name of | the corporation: 1000 HIGHWA | Y 98 EAST CORI | 1 | | | • • • |
| 2. The principa | office address: 10800 NW 1060 | Street, Suite 6, M | edley FL 33 | 178 | | |
| | | | : | | - • • • | ·. · |
| 3. The mailing | address (if different): | | | | *. | |
| 4. Date of incor | poration/qualification: 10/17/19 | 94 Do | ocument nu | mber: P94000 | 076214 | |
| 5. The name and Florida Depa | d street address of the current re itment of State: (If resigned, ent | gistered agent and | • | | vith the | |
| • | Elad, Reuveni | | · ·. | • | • | ٠. |
| | 10800 NW 106th Street, Suite 6 | | | | _ | |
| | Medley FL 33178 | | | * | | 2 <u>0</u> . |
| 6. The name are (if changed): | d street address of the new regist | ered agent (if cha | nged) and /o | or registered o | — Mice | 2157.2 |
| | C T Corporation System | | | | | , , , , , , , , , , , , , , , , , , , |
| | 1200 South Pine Island Road | | | •• | - SE | P. : |
| | | P.O. Box. NOT accer | table | . , | -45; -700 | 2 |
| | Plantation, Florida 33324 | | · | | | 9 |
| The street addre | ss of its registered office and the identical. | he street address o | of the busin | ess office of i | ts registe | red agent. |
| Such change was authorized by th | is authorized by resolution duly board, or the corporation has | adopted by its be been notified in | | ctors or by an he change. President | officers | 80 - |
| Signatur | not an officer or director | Ellezer | | rresident | ale . | |
| I hereby accept I further agree t of my duties, and document is bein corporation has C T Corporation | the appointment as registered of comply with the provisions of all am familiar with and accepting filed merely to reflect a charbeen notified in writing of this System | igent and agree to fall statutes relate the obligation of oge in the register change | | | | rformance Or, if this m that the |
| ·- | - Michael Carry | 03/23 | 3/2021 | •• | | |
| Sign | unum of Registered Agent | · · · · · · · · · · · · · · · · · · | | Date | ٠ | · |
| lf signing on bel | nalf of an entity: | | | | | ٠., . |
| Madonna Cu | ddihy, Assistant Secretary . | | | ٠, | | |
| Ту | ped or Printed Name | - : | | | | |
| • | ***FIL | ING FEE: \$35.0 | 0 * * * | | | |
| MA PRZEDIS (04/13) | MAKE CHECKS PAYABLE IL TO: DIVISION OF CORPORAT | TO FLORIDA DEI IONS, P.O. BOX 6 | PARTMENT 327, TALL | OF STATE MASSEE, FL | 32314 | |

CR2E015 (04/13)