

P98 0000 28214

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

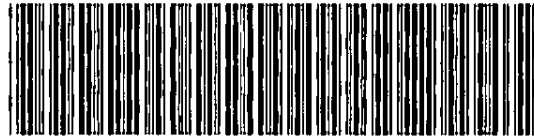
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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R/A CW

FISHMAN LAW
PLLC

BY USPS

October 26, 2020

Florida Secretary of State
Division of Corporations
Registration Section
The Centre of Tallahassee
2415 N. Monroe Street
Suite 810
Tallahassee, FL 32303

RE: Change of Address and Change of Registered Agent

Dear Division of Corporations,

I enclose cover letters and Statement of Change of Registered Agent/Office forms for six (6) Florida entities, as well as payment of \$160 by enclosed check.

1450, Inc.;

Liberty Productions, LLC;

SWIPED, LLC;

Marriage Material, LLC;

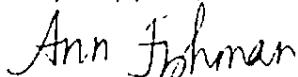
Arms Control, LLC;

I Survived My Husband's Birthday, LLC.

Kindly note that I have gone online to update the principal office addresses of these entities as well as that of my law firm Fishman Law PLLC and don't see any updates online. I understand that you are busy and just want to be certain that you have received the updates. All of the above entities as well as Fishman Law PLLC should show a principal address at:

C/O Fishman Law PLLC
500 S. Australian Avenue
Suite 500
West Palm Beach, Florida 33401

Very truly yours,



Ann Deborah Fishman, Esquire

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: 1450, Inc.
Name of Corporation

DOCUMENT NUMBER: P98000028214

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:

Ann Fishman

Name of Contact Person

Fishman Law PLLC

Firm/Company

550 Okeechobee Blvd. Apt. 1723

Address

West Palm Beach, Florida 33401

City/State and Zip Code

ann@fishman.law

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

For further information concerning this matter, please call:

Ann Fishman

Name of Contact Person

at (561) 310-8822

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: 1450, Inc.
2. The principal office address: 500 S. Australian Avenue Suite #500
West Palm Beach, Florida 33401
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 3/26/1998 Document number: P98000028214
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)

Ann Fishman

340 Royal Poinciana Way Unit 317/319

Palm Beach, Florida 33480

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

Fishman Law PLLC

500 S. Australian Avenue Suite #500

P.O. Box NOT acceptable

West Palm Beach, Florida 33401

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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.

Ann Fishman

Signature of an officer or director

Ann Fishman, VP

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.

Ann Fishman

Signature of Registered Agent

for Fishman Law PLLC

10/26/2020

Date

If signing on behalf of an entity:

Fishman Law PLLC by Ann Fishman

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 (04/13)