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SECRETARY OF STATE

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COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Manta Consulting Inc. Name of Corporation
DOCUMENT NUMBER:
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:
Monica Jain Name of Contact Person Manta Consulfing Inc Firm/Company 881 Ocean Dr #12 C Address Key Biscarne, FL 33149 City/State-and Zip Code mantaconsulfing@gmail.com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Monica Jain at (831), 920 8377 Name of Contact Person Area Code & Daytime Telephone Number
The source buy time receptione runnyer

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

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this ange is submitted for a corporation organized under the laws of the State of	
in orde	er to change its registered office or registered agent, or both, in the State of Florida.	
1. The name of t	the corporation: Manta Consulting Inc office address: 281 Ocean Dr #12C Key Biscayne, FL 33149	
2. The principal	office address: 881 Ocean Dr #12C	
-	Key Biscayne, FL 33149	
3. The mailing a	address (if different):	
4. Date of incorp	poration/qualification: Document number:	
5. The name and Florida Depar	d street address of the current registered agent and registered office on file with the rtment of State: (If resigned, enter resigned)	
	Helga Dienes	
	199 Ocean Ln #500	
	Helga Dienes 199 Ocean Ln #500 Key Biscayne FL 33149 distreet address of the new registered agent (if changed) and /or registered offices	741
6. The name and (if changed):	d street address of the new registered agent (if changed) and /or registered office	1144. 2340
	Monica Jain	n J
	881 Ocean Dr #12c FA &	
	Key Biscayne, FL 33149	
The street address as changed will	ess of its registered office and the street address of the business office of its registered agent, be identical.	
Such change wa authorized by th	as authorized by resolution duly adopted by its board of directors or by an officer so he board, or the corporation has been notified in writing of the change.	
Signature	Monica Jain, Executive Director Production P	-f=01
l hereovaccept i I further agree to of my duties, and document is bein	the appointment as registered agent and agree to act in this capacity. To comply with the provisions of all statutes relative to the proper and complete performance of a lamiliar with and accept the obligation of my position as registered agent. Or, if this ng filed merely to reflect a change in the registered office address. I hereby confirm that the been notified in writing of this change.	
20	Mu Co Jan 10-19-2020 nature of Registered Agent Date	
Sign	nature of Registered Agent Date	
If signing on beh	half of an entity:	
4		
Туг	ped or Printed Name	

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