P99000037304

(Requestor's Name)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
Certified Copies Certificates of Status		
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06/04/24--01041--007 **35.00

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COVER LETTER

TO:

Amendment Section Division of Corporations

SUBJECT: THE PROFESSIONAL EMPLOYEE, INC. Name of Corporation	· · · · · · · · · · · · · · · · · · ·
DOCUMENT NUMBER: P99000037304	
The enclosed Statement of Change of Registered O	ffice/Agent and fee are submitted for filing.
Please return all correspondence concerning this ma	atter to the following:
Michael Serrano	
Name of Contact Person	
ZenBusiness Inc.	
Firm/Company	
336 East College Ave.	
Address	
Suite 301	
City/State and Zip Code	
Tallahassee, FL 32301	
E-mail address: (to be used for future annual re	port notification)
For further information concerning this matter, plea	ase call:
Michael Serrano	at (844) 493-6249
Name of Contact Person	at (844) 493-6249 Area Code & Daytime Telephone Number
Enclosed is a \$35.00 check made payable to the De	partment of State.
Mailing Address:	Street Address:
Amendment Section	Amendment Section
Division of Corporations P.O. Box 6327	Division of Corporations The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

CR2E045 (04/13)

Tallahassee, FL 32314

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

statement of ch	ange is submitted for a corporation o	7.0502, 607.1508, or 617.1508, Florida Statutes, this organized under the laws of the State of Florida registered agent, or both, in the State of Florida.	-
1. The name of	the corporation:	ONAL EMPLOYEE, INC.	_
2. The principal	l office address: 15201 N. CLEVEL	AND AVE #930 NORTH FORT MYERS, FL 33903	_
3. The mailing a	address (if different): 1030 Southeast	19th Avenue #151383 CAPE CORAL, FL 33990	_ FL 33319
4. Date of incor	poration/qualification: 04/23/1999	9th Avenue #151383 CAPE CORAL, FL 33990 Document number: P99000037304	
5. The name and		ered agent and registered office on file with the	
	Corporate Legal Solutions		
	12670 NEW BRITTANY BLVD, SU	7024 Z024	
	FORT MYERS, FL 33907		
6. The name and (if changed):	d street address of the new registered	I agent (if changed) and /or registered office	:
	ZenBusiness Inc.		
	336 E. College Ave. Suite 301	:>	
	P. Tallahassee, FL 32301	O. Box NOT acceptable	
The street addreas changed will		treet address of the business office of its registered agent	t.
Such change wa authorized by th	as authorized by resolution duly add ne board, or the corporation has bee	opted by its board of directors or by an officer so an notified in writing of the change.	
	orge Michael Gooden Jr	Dina D Clark	
·	re of an officer or director	Printed or typed name and title	
I further agree to of my duties, an document is beil corporation has	s been notified in writing of this cha	statutes relative to the proper and complete performance obligation of my position as registered agent. Or, if this in the registered office address. I hereby confirm that the	te is e
that Ae	mily	04-12-2024	
Sign	nature of Registered Agent	Date	
If signing on be	half of an entity:		
Khadijeh Hemm	ati		

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

Typed or Printed Name