## D990000065349

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## **COVER LETTER**

Amendment Section Division of Corporations

TO:

SUBJECT: ALL American youth Activities of Name of Corporation Florida, Inc
DOCUMENT NUMBER: P9900065349
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:
CHCRYL G. AD D. O.  Name of Contact Person  All American Youth Activities  Firm/Company  860   Hulsey B.  Address  Thing The 33634  City/State and Zip Code  E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
CHERY GIAD NO at 813 495 - 159  Name of Contact Person 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

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

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 ofin order to change its registered office or registered agent, or both. in the State of Florida.
1. The name of the corporation: All American youth Activities of Fla.
2. The principal office address: 860/ HU/5EY M
3. The mailing address (if different):
4. Date of incorporation/qualification: $\sqrt{3/9}$ $\sqrt{3}$ /99 Document number: $\sqrt{990000653}$
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)
the Plante (AW 680UP
806 No Armenia AUCIE
TAMPA FL 3360 FR & TI
6. The name and street address of the new registered agent (if changed) and /or registered of the company of the changed):
P.O. Box NOT acceptable
- TAMPA FL 33634
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.
Keysignature of an officer or director  CHCHY TATOL VI  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 prefet to reflect a change in the registered office address, I hereby confirm that the corporation has been potified in writing of this change.
Signature of Registered Agent  1 Jane 1 Jane 1
If signing on behalf of an entity:
CHERYI G'ADDINO
Typed or Printed Name

Make checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

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