

V09829

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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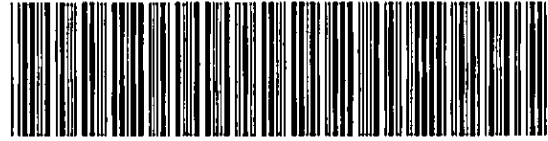
(Business Entity Name)

(Document Number)

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Flantastic Enterprises, Inc.
Name of Corporation

DOCUMENT NUMBER: V09829

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:

Rumbellis Robinson

Name of Contact Person

Flantastic Enterprises, Inc.

Firm/Company

508 Saint Claude Place

Address

Saint Johns, Florida 32259

City/State and Zip Code

flantastic@att.net

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

For further information concerning this matter, please call:

Rumbellis Robinson

at (904) 476-9106

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
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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.

2. The principal office address: 508 Saint Claude Place, Saint Johns, FL 32259

4. Date of incorporation/qualification: 01/29/1992 Document number: V09829

Jacksonville, FL 32258

Saint Johns, FL 32259

Rumbellis Robinson
Printed or typed name and title

11/24/2020

Date

CR2E045 (04/13)