I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: MADDISON BYRNES

Electronic Signature of Signing Officer/Director Detail

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE	BRUCE E BECK			04/30/2021
	Electronic Signature of Registered Agent			Date
Officer/Director Detail :				
Title	TREASURER	Title	OFFICER	
Name	BECK, BRUCE	Name	RONGA, SALVATORE	
Address	17230 GULF PINE CIRCLE	Address	9067 SOUTHERN BLVD	
City-State-Zip:	WELLINGTON FL 33414	City-State-Zip:	WEST PALM BEACH FL 3341	1
Title	PRESIDENT	Title	VICE PRESIDENT	
Name	BYRNES, MADDISON A	Name	BECK, STEPHANIE	
Address	9067 SOUTHERN BLVD.	Address	17230 GULF PINE CIRCLE	
City-State-Zip:	WEST PALM BEACH FL 33411	City-State-Zip:	WELLINGTON FL 33414	

BECK, BRUCE E 9067 SOUTHERN BLVD. WEST PALM BEACH, FL 33411 US

Current Principal Place of Business:

9067 SOUTHERN BLVD WEST PALM BEACH. FL 33411

DOCUMENT# J11096

Current Mailing Address:

9067 SOUTHERN BLVD. WEST PALM BEACH. FL 33411 US

FEI Number: 59-2691892

Entity Name: PROFESSIONAL CONCESSIONS, INC.

Name and Address of Current Registered Agent:

FILED Apr 30, 2021 Secretary of State 9894566242CC

Certificate of Status Desired: Yes

PRESIDENT

04/30/2021

Date