The above na	amed entity submits this statement for the	purpose of changing its registered office or i	egistered agent, or both, in the State of F	lorida.
SIGNATL	IRE:			
	Electronic Signature of Regist	tered Agent		
Officer/D	irector Detail :			
Title	PD	Title	С	
Name	WYKLE, ANNA	Name	WYKLE, ANNA	

7136 NORTH FOLGER TERRACE CITRUS SPRINGS. FL 34434

DOCUMENT# P08000077030

7136 NORTH FOLGER TERRACE CITRUS SPRINGS. FL 34434

Current Mailing Address:

Entity Name: 796 OPERATING CORP

Current Principal Place of Business:

FEI Number: 26-4838523

Name and Address of Current Registered Agent:

7136 NORTH FOLGER TERRACE

WYKLE, ANNA 7136 N. FOLGER TERRACE CITRUS SPRINGS, FL 34434 US

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: ANNA DUGIN-WYKLE

Electronic Signature of Signing Officer/Director Detail

7136 NORTH FOLGER TERRACE Address City-State-Zip: CITRUS SPRINGS FL 34434

PRESIDENT

Certificate of Status Desired: No

04/28/2015

Date

FILED Apr 28, 2015

Secretary of State CC1986670128

2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

City-State-Zip: CITRUS SPRINGS FL 34434

Title Name Address

Date