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Florida Department of State
Division of Corporations
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To: Division of Corporations
 Fax Number : (850)617-6380

From: Account Name : REGISTERED AGENTS INC.
 Account Number : I20090000081
 Phone : (307)200-2803
 Fax Number : (855)330-1010

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SECRETARY OF STATE
DIVISION OF CORPORATIONS

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

REGISTERED AGENT CHANGE NATIONAL DOMESTIC WORKERS ALLIANCE, INC.

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Certificate of Status	0
Certified Copy	0
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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: NATIONAL DOMESTIC WORKERS ALLIANCE, INC.
Name of Corporation

DOCUMENT NUMBER: F13000002912

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:

MORGAN NOBLE
Name of Contact Person

Firm/Company

7901 4TH ST N, STE 300
Address

ST. PETERSBURG, FL 33702
City/State and Zip Code

eastern@northwestregisteredagent.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Morgan Noble at (509) 768-2249
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

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 of NEW YORK in order to change its registered office or registered agent, or both, in the State of Florida.

- 1. The name of the corporation: NATIONAL DOMESTIC WORKERS ALLIANCE, INC.
- 2. The principal office address: 45 BROADWAY, SUITE 320
NEW YORK, NY 10006
- 3. The mailing address (if different): _____
- 4. Date of incorporation/qualification: 07/02/2013 Document number: F13000002912
- 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)

INCORP SERVICES, INC.
17888 67TH COURT NORTH
LOXAHATCHEE, FL 33470

- 6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

NORTHWEST REGISTERED AGENT LLC
7901 4TH ST N. STE 300
 P.O. Box NOT acceptable
ST. PETERSBURG, FL 33702

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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.

Mariana Viturro
 Signature of an officer or director

Mariana Viturro / President
 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 merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

Morgan Noble
 Signature of Registered Agent

10/27/2021
 Date

If signing on behalf of an entity:

Morgan Noble / Authorized Representative
 Typed or Printed Name

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
 MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
 CR2E045 (04/13)