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Office Use Only



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COVER LETTER

TO:

Amendment Section Division of Corporations

FLEVATE DESTINATIONS INC		
SUBJECT: ELEVATE DESTINATIONS INC. Name of Corporation		
DOCUMENT NUMBER: F17000001619		
The enclosed Statement of Change of Registered	d Office/Agent and fee are submitted for filing.	
Please return all correspondence concerning this	matter to the following:	
Cameron Biddy		
Name of Contact Person		
ZenBusiness Inc.		
Firm/Company		
336 E. College Ave. Suite 301		
Address		
Tallahassee, FL 32301		
City/State and Zip Code		
ra@zenbusiness.com		
E-mail address: (to be used for future annual	report notification)	
For further information concerning this matter, p	olease call:	
Cameron Biddy	at (844) 493-6249 Area Code & Daytime Telephone Number	
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	Street Address: Amendment Section Division of Corporations	
P.O. Box 6327 The Centre of Tallahassee		
Tallahassee, FL 32314	e, FL 32314 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

statement of cha	inge is submitted for a corporation	17.0502, 607.1508, or 617.1508, Florida Statutes, this organized under the laws of the State of MA registered agent, or both, in the State of Florida.	
	the corporation: ELEVATE, INC.	registered agent, or both, in the state of Pioritia.	
	office address: 143 South Road		
		Chilmark MA 02535	
3. The mailing a	iddress (if different): PO Box 480 o	E1700001610	
4. Date of incorp	poration/qualification:	Document number: F17000001619	
	I street address of the current registment of State: (If resigned, enter	tered agent and registered office on file with the resigned)	
	WERBOW, MICHAEL		
	2267 HILLVIEW STREET		
	SARASOTA, FL 34239		
6. The name and (if changed):	d street address of the new register	ed agent (if changed) and /or registered office	
	ZenBusiness Inc.	70	
336 E. College Ave. Suite 301 P.O. Box. NOT acceptable			
The street address changed will	ess of its registered office and the be identical.	street address of the business office of its registered agents	
Such change was authorized by the	as authorized by resolution duly and board, or the corporation has b	dopted by its board of directors or by an officer so een notified in writing of the change.	
/s/ Dominique	2 Callimanopulos	Dominique Callimanopulos, President	
	re of an officer or director	Printed or typed name and title	
l further agree of my duties, ar document is bei	to comply with the provisions of a ad I am familiar with and accept t	gent and agree to act in this capacity, all statutes relative to the proper and complete performance he obligation of my position as registered agent. Or, if this we in the registered office address. I hereby confirm that the hange.	
What a	Jem Ar	3/25/24	
Sig	nature of Registered Agent	Date	
If signing on be	half of an entity:		
Khadijeh Hemm	ati		
Т	yped 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)