P09000073297

(Req	uestor's Name)		
(Add	ress)	<u> </u>	
(Add	ress)		
(City	/State/Zip/Phon	e #)	
PICK-UP	☐ WAIT	MAIL	
(Business Entity Name)			
(Document Number)			
Certified Copies	Certificate	s of Status	
Special Instructions to Filing Officer:			
		;	
<u></u>			

Office Use Only



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COVER LETTER

TO:	Amendment Section Division of Corporations	. •	
SUBJ Name	ECT: DONNA MANCINI STAGING & RE of Corporation	EDESIGN, INC.	
DOC	JMENT NUMBER: P09000073297		
The er	nclosed Statement of Change of Registere	ed Office/Agent and fee are submitted for filing.	
	return all correspondence concerning thi		
	TH, ESQ.		
Name	of Contact Person		
	LAW FIRM PL		
	Company		
	ATE ROAD 13 NORTH, SUITE 106-134		
Addres			
	JOHNS, FL 32259		
City/S	tate and Zip Code		
	JB@ROTHFIRM.NET		
E-mai	l address: (to be used for future annua	l report notification)	
For fur	ther information concerning this matter,	please call:	
JB RO	тн	or (904 \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	
	Name of Contact Person	at (904) 595-7900 Area Code & Daytime Telephone Number	
Enclose	ed 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	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

Simement by the	e provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statute hange is submitted for a corporation organized under the laws of the State of <u>FLORI</u> der to change its registered office or registered agent, or both, in the State of Florida	'nΔ		
	f the corporation: DONNA MANCINI STAGING & REDESIGN, INC.	•		
	al office address: 141 HILDEN ROAD, SUITE 202			
3. The mailing a	address (if different):			
4. Date of incorporation/qualification: 08/31/2009 Document number: P09000073297				
5. The name and Florida Depar	nd street address of the current registered agent and registered office on file with the artment of State: (If resigned, enter resigned)			
	ROTH LAW FIRM PL			
	6100 GREENLAND ROAD, SUITE 604			
	JACKSONVILLE, FL 32258			
6. The name and (if changed):	ad street address of the new registered agent (if changed) and /or registered office	ن. نان		
	ROTH LAW FIRM PL	<u> </u>		
12724 GRAN BAY PARKWAY WEST, SUITE 410				
	P.O. Box NOT acceptable JACKSONVILLE, FL 32258			
The street address changed will	ess of its registered office and the street address of the business office of its regist	ered agent,		
Such change wa authorized by th	as authorized by resolution duly adopted by its board of directors or by an officer he board or the corporation has been notified in writing of the change.	so		
Signatur	DONNA MANCINI, PRESIDENT			
l hereby accept I further agree to of my duties, and document is bein corporation has	the appointment as registered agent and agree to act in this capacity. to comply with the provisions of all statutes relative to the proper and complete paid I am familiar with and accept the obligation of my position as registered agent, in filed merely to reflect a change in the registered office address, I hereby confit been notified in writing of this change.	erformance Or, if this rm that the		
	12/9/2020			
	chalf of an entity:			
JEAN B. ROTH	•			
Ту	yped or Printed Name			

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