P1700069792

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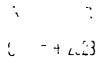
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TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations	
SUBJECT:NDB SALES, INC	
JUDGECT.	(Name of Corporation)
DOCUMENT NUMBER: P17000067972	
The enclosed Officer/Director Resignation	n for a Corporation and fee are submitted for filing
Please return all correspondence concerni	ng this matter to the following:
DYANNA S. BRUNO	
(Name of Person)	
NDB SALES, INC.	
(Name of Firm/Company	()
6682 VIA REGINA	
(Address)	
BOCA RATON, FL 33433	
(City/State and Zip Code	
For further information concerning this m	atter, please call:
DYANNA S. BRUNO	at (954 638-5675 (Area Code & Daytime Telephone Number)
(Name of Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check for \$35.00 made paya	able to the Florida Department of State.
Mailing Address:	Street Address:
Amendment Section	Amendment Section
Division of Corporations	Division of Corporations
P.O. Box 6327	The Centre of Tallahassee
Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810
	Tallahassee, FL 32303

. STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	nge is submitted for a corporation	on 7.0302, 607.1308, or 617.1308, Florida Stattle on organized under the laws of the State of FLORI or registered agent, or both, in the State of Florida	DA
1. The name of t	he corporation: NDB SALES, IN	NC.	-
2. The principal BOCA RATON,	office address: 6205 BALBOA C	CIRCLE, 305	
3. The mailing a	ddress (if different):		
4. Date of incorp	oration/qualification: 4/30/2018	Document number: P17000069792	·-··
	street address of the current reg tment of State: (If resigned, ente	sistered agent and registered office on file with the resigned)	
	VALEZAR & ASSOCIATES IN	IC. (RESIGNED)	
	12485 SW 137TH AVE 206		
	MIAMI, FL 33186		
6. The name and (if changed):	street address of the new registe	ered agent (if changed) and /or registered office	
	DYANNA S. BRUNO		÷
	6682 VIA REGINA		्र्युं रु
		P.O. Box NOT acceptable	2.
	BOCA RATON, FL 33433		
The street address changed will	ss of its registered office and the identical.	ne street address of the business office of its regis	stered agent,
Such change wa authorized by th	s authorized by resolution duly the board, or the corporation has	adopted by its board of directors or by an office been notified in writing of the change.	r so
Dupul		DYANNA S. BRUNO	
Signatu	e of an officer or director	Printed or typed name and title	
I hereby accept I further agree i of my duties, an document is bei corporation has	the appointment as registered of comply with the provisions of all am familiar with and accepting filed merely to reflect a charbeen notified in writing of this	agent and agree to act in this capacity. If all statutes relative to the proper and complete If the obligation of my position as registered agen If the registered office address, I hereby con Change.	performance t. Or if this firm that the
Dunk		8/28/2023	
Sig	nature of Registered Agent	Date	
If signing on be	half of an entity:		
Т	ped or Printed Name	_	

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

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