## 7190000 47948

(Req	uestor's Name)	
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## **COVER LETTER**

Amendment Section

TO:

Division of Corporations SUBJECT: DESIGN CONSTRUCTION GROUP, INC. Name of Corporation DOCUMENT NUMBER: P19000047948 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: JB ROTH, ESQ. Name of Contact Person ROTH LAW FIRM PL Firm/Company 450 STATE ROAD 13 NORTH, SUITE 106-134 Address SAINT JOHNS, FL 32259 City/State and Zip Code JB@ROTHFIRM.NET E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: JB ROTH Name of Contact Person Area Code & Daytime Telephone Number Enclosed is a \$35.00 check made payable to the Department of State. Mailing Address: Street Address: Amendment Section Amendment Section Division of Corporations Division of Corporations

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

CR2E045 (04/13)

P.O. Box 6327

Taliahassee, FL 32314

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

statement of change is submitted for a	607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this corporation organized under the laws of the State of FLORIDA
	red office or registered agent, or both, in the State of Florida.
1. The name of the corporation: DESI	
2. The principal office address: <sup>6988</sup> UST. AUGUSTINE, FL 32095	S HWY I NORTH, SUITE 305
3. The mailing address (if different):	
4. Date of incorporation/qualification:	06/04/2019 Document number: P19000047948
5. The name and street address of the of Florida Department of State: (If resi	current registered agent and registered office on file with the gned, enter resigned)
ROTH LAW FIRM P	
6100 GREENLAND	COAD, SUITE 604
JACKSONVILLE, FL	32258
6. The name and street address of the r (if changed):	new registered agent (if changed) and /or registered office
ROTH LAW FIRM PI	÷ 
12724 GRAN BAY PA	ARKWAY WEST, SUITE 410
JACKSONVILLE, FL	P.O. Box NOT acceptable
The street address of its registered of as changed will be identical.	ice and the street address of the business office of its registered agent,
	ation duly adopted by its board of directors or by an officer so ration has been notified in writing of the change.
	MICHAEL MANCINI, PRESIDENT
I hereby accept the appointment as re literary accept the appointment as re literary with the proof my duties, and I am familiar with a document is being filed merely to refloorporation has been notified in writing	Printed or typed name and title gistered agent and agree to act in this capacity. visions of all statutes relative to the proper and complete performance nd accept the obligation of my position as registered agent. Or, if this ect a change in the registered office address, I hereby confirm that the ng of this change.
Signature of Registered Agent	12/9/2020
If signing on behalf of an entity:	
JEAN B. ROTH	
Typed or Printed Name	<del></del>
	* * * 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)