

Division of Corporations

Electronic Filing Cover Sheet

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Division of Corporations Fax Number : (850)617-6380

From:

Account Name : COMPUTERSHARE Account Number : 110432003053 : (561)694-8107 : (561)214-8442 Phone Fax Number

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 CAPITAL IMPROVEMENT CORP.

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Estimated Charge	\$35.00

Electronic Filing Menu

Corporate Filing Menu

Help

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

statement of che	unge is submitted for a corporation	617.0502, 607.1508, or 617.1508, Florida Statutes, this on organized under the laws of the State of Delaware	
	. 2	or registered agent, or both, in the State of Florida.	
	the corporation: National Capital		
2. The principal	office address: 2677 North Main S	StreetSuite 400, Santa Ana, CA 92705	
3. The mailing a	address (if different):		
4. Date of incor	Date of incorporation/qualification: 12/23/2019 Document number: F19000005676		
	d street address of the current reg rtment of State: (If resigned, ente	istered agent and registered office on file with the resigned)	
	COGENCY GLOBAL INC.		
	115 NORTH CALHOUN STREET, SUITE 4		
	TALLAHASSEE, FL 32301		
6. The name and (if changed):	d street address of the new registo	ered agent (if changed) and /or registered office	
	Corporate Creations Network Inc.		
	801 US Highway 1		
		P.O. Box. NOT acceptable	
	North Palm BEach, FL 33408		
The street address changed will	ess of its registered office and the be identical.	ne street address of the business office of its registered agent,	
Such change wa authorized by the	as authorized by resolution duly ne board, or the corporation has	adopted by its board of directors or by an officer so been notified in writing of the change.	
/s/ Tiffany Meeker		Tiffany Meeker, Attorney-in-Fact	
	re of an officer or director	Printed or typed name and title	
l further agrée of my duties, an docúment is bei	the appointment as registered a to comply with the provisions of ad I am familiar with and accept ing filed merely to reflect a chan s been notified in writing of this	igent and agree to act in this capacity. I all statutes relative to the proper and complete performance I the obligation of my position as registered agent. Or, if this ige in the registered office address, I hereby confirm that the change.	
/s/ Tiffany Meeker		12/26/2023	
Sig	nature of Registered Agent	Date	
If signing on be	half of an entity:		
Tiffany Meeker,	Special Secretary		
T	yped or Printed Name		

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