I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: ALBERT M ESPOSITO

Electronic Signature of Signing Officer/Director Detail

Entity Name: ALBERT M. ESPOSITO & ASSOCIATES, INC.

Current Principal Place of Business:

213 S SECOND ST UNIT 5 FLAGLER BEACH, FL 32136

Current Mailing Address:

PO BOX 1836 FLAGLER BCH, FL 32136-8836 US

FEI Number: 59-2578604

Name and Address of Current Registered Agent:

ESPOSITO, ALBERT M. 213 S SECOND STREET UNIT 5 FLAGLER BCH, FL 32136 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: ALBERT M ESPOSITO

Electronic Signature of Registered Agent

Officer/Director Detail :

Title Þ ESPOSITO, ALBERT M. Name Address **16 COLLINGVILLE COURT** City-State-Zip: PALM COAST FL 32137

> Ρ 02/11/2022

FILED Feb 11, 2022 Secretary of State 0218037038CC

Certificate of Status Desired: No

02/11/2022

Date

Date