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: THOMAS CLARKSON

Electronic Signature of Signing Officer/Director Detail

2019 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F12000001708

Entity Name: STACHE INVESTMENTS CORPORATION

Current Principal Place of Business:

4101 GULF SHORE BLVD. N. PH #1 NAPLES, FL 34103-2911

Current Mailing Address:

4101 GULF SHORE BLVD. N. PH #1 NAPLES, FL 34103-2911 US

FEI Number: NOT APPLICABLE

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM 1200 SOUTH PINE ISLAND RD PLANTATION, FL 33324 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:

Electronic Signature of Registered Agent

Officer/Director Detail :

Title	PD	Title	ST
Name	KHAN, SHAHID R	Name	CLARKSON, THOMAS D
Address	PH #1	Address	502 E ANTHONY DR
City-State-Zip		City-State-Zip:	URBANA IL 61802
ony onate zip.			

FILED Apr 08, 2019 Secretary of State 2811735544CC

Certificate of Status Desired: No

04/08/2019 Date

Date

SECRETARY