

FO8000003583

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

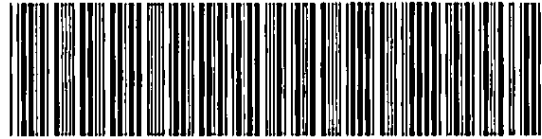
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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*Registered office
change*

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2021 AUG -3 AM 11:35

SECRETARY OF STATE
TALLAHASSEE, FL 32301

AUG 17 2021

A RAMSEY

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Veriato, Inc.
Name of Corporation

DOCUMENT NUMBER: F08000003583

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:

Ruth Ann McVeigh
Name of Contact Person

Veriato, Inc.
Firm/Company

700 S. Rosemary Ave., Suite 204-144
Address

West Palm Beach, FL 33401
City/State and Zip Code

rmcveigh@veriato.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Ruth Ann McVeigh at (561) 209-1256
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of DE in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Veriato, Inc.
2. The principal office address: 700 S. Rosemary Ave., Suite 204-144, West Palm Beach, FL 33401
3. The mailing address (if different): _____
4. Date of incorporation/qualification: Aug 14, 2008 Document number: F08000003583
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

Deha Rozanes

4440 PGA Boulevard, Suite 500

Palm Beach Gardens, FL 33410

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

700 S. Rosemary Ave.

Suite 204-144

P.O. Box NOT acceptable

West Palm Beach, FL 33401

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

Deha Rozanes
Signature of an officer or director

Deha Rozanes, CFO
Printed or typed name and title

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

Deha Rozanes
Signature of Registered Agent

07/30/2021

Date

If signing on behalf of an entity:

Deha Rozanes

Typed or Printed Name

***** 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)

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TALLAHASSEE, FL