# Florida Department of States Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name : INCORP SERVICES INC

Account Number : 120120000007 Phone : (702)866-2500

Fax Number : (702),866-2689

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address: <u>documents@incorp.com</u>

RECEIVENE 18 AUG - 2 AM PELIA SECRETARY OF THE

#### REGISTERED AGENT CHANGE ALAN J. ZUCCARI, INC.

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#### **COVER LETTER**

TO:	Amendment Secti Division of Corpo				
SUBJ	ECT:	Alan J. Zuo	cari, Inc. Corporation	_	
		Name of	Corporation		
DOC	UMENT NUMBER	F.	12000000408	_	
The er	nclosed Statement of	Change of Registered Off	ice/Agent and fee are submitted for	filing.	
Plcaso	return all correspor	dence concerning this mat	ter to the following:		
	, , , , , , , , , , , , , , , , , , ,				
		Kathy	y Shin Contact Person		
		Name of C	ontact Person	•	
		InCorp S	ervices, Inc.		
	*-**	Firm/0	Соприну	-	
3773 Howard Hughes Pkwy. · Suite 500\$					
	<del></del>		ldress	-	
		Los Vogos d	NV 20160 6014		
	Las Vegas, NV 89169-6014  City/State and Zip Code				
		·	·		
documents@incorp.com E-mail address: (to be used for future annual report notification)					
	D-HITI	address: (to be used for	ruture atmust report notification,	J	
For Ju	rther information co	neerning this matter, please	e call:		
Kath	v Shin for InCorp S	ervices. Inc.	at (800)246-2677		
	Name of C	ontact Person	Area Code & Daytime Tele	phone Number	
Enclos	sed is a \$35.00 check	made payable to the Depa	artment of State.		
		siling Address:	Street Address:		
		mendment Section	Amendment Section		
		vision of Corporations O. Box 6327	Division of Corporation Clifton Building	ons	
		illahassee, FL 32314	2661 Executive Cente	r Circle	
		•	Tallahassee, FL 3230	l	

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CRZE045 (03/12)

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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. Floridu Statutes, this statement of change is submitted for a corporation organized under the laws of the State ofin order to change its registered office or registered agent, or both, in the State of Florida.					
The name of the corporation: Alan J. Zuccari, Inc.					
2. The principal office address: 4100 Monument Corner Drive Suite 500					
Fairfax, VA 22030					
3. The mailing address (if different):					
4. Date of incorporation/qualification: 01/27/2012 Document number: F12000000408					
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)					
NRAI SERVICES, INC					
1200 South Pine Island Road					
Plantation, FL 33324					
6. The name and street address of the new registered agent (if changed) and for registered agent (if changed):					
InCorp Services, Inc.					
17888 67th Court North					
P.O. Box. NOT accountie					
Loxaliatchee, FL 33470					
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.					
Alan J. Zuccari, President Signature an afficer or director Printed or typed native and latter					
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 performence of my dulies, 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 duriem that the proportion has been notified in writing of this change.					
July 25, 2018  Signature of Resistence Agent  Date					
It signing on behalf of an entity:					
Kathy Shin on beahlf of InCorp Services, Inc. Typed or Primed Name					
* * * PILING FEE: \$35.00 * * *					

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (63712)

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