

F17000004889

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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MAIL

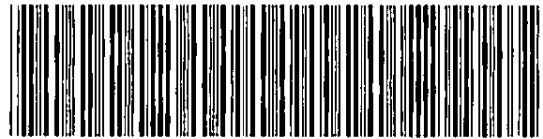
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: DAVIDSON'S INC.
Name of Corporation

DOCUMENT NUMBER: F17000004889

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:

ANDREW KRAMER
Name of Contact Person
DAVIDSON'S, INC.
Firm/Company
6100 WILKINSON DR.
Address
PRESCOTT, AZ 86301
City/State and Zip Code
DREW.KRAMER@DAVIDSONSINC.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

ANDREW KRAMER
Name of Contact Person at (928) 776-8055
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
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 ARIZONA in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: DAVIDSON'S, INC.
2. The principal office address: 6100 WILKINSON DR., PRESCOTT, AZ 86301-6162
3. The mailing address (if different): _____
4. Date of incorporation/qualification: OCTOBER 31, 2017 Document number: F17000004889
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)

Corporation Service Company

1201 Hays Street

Tallahassee, FL 32301

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

InCorp Services, Inc.

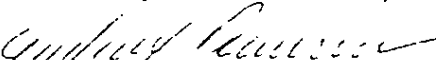
3458 Lakeshore Drive

P.O. Box NOT acceptable

Tallahassee, FL 32312

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.



Signature of an officer or director

Andrew Kramer, Secretary

Printed or typed name and title

I hereby accept the appointment and provisions of all statutes relative to my 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.



Signature of Registered Agent

September 19, 2024

Date

If signing on behalf of an entity:

Melanie Galero on behalf of InCorp Services, Inc.

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)

FILED
24 OCT -1 PM 12:04
TALLAHASSEE, FLORIDA