

5/12/22, 2:45 PM

Division of Corporations

## Florida Department of State

Division of Corporations  
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## To:

Division of Corporations  
Fax Number : (850)617-6380

## From:

Account Name : C T CORPORATION SYSTEM  
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## REGISTERED AGENT CHANGE

NUVOLA, INC.

Certificate of Status	0
Certified Copy <b>Q. SILAS</b>	1
Page Count <b>MAY 13 2022</b>	02
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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, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Delaware in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: NUVOLA, INC.
2. The principal office address: 3150 SABRE DR MD 9105  
SOUTHLAKE TX, 76092-2103
3. The mailing address (if different): \_\_\_\_\_
4. Date of incorporation/qualification: 08/10/2018 Document number: F15000003754
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)

Juan Carlos Abello

110 EAST BROWARD BLVD STE 1700

FORT LAUDERDALE, FL 33301

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

C T Corporation System

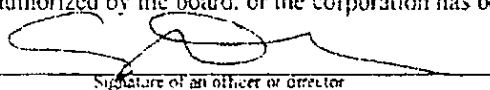
1200 South Pine Island Road

P.O. Box NOT acceptable

Plantation, Florida 33324

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

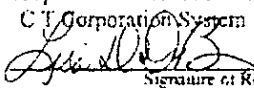
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

  
Signature of an officer or director

Steve Milton Secretary

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.

By: C T Corporation System  
  
Signature of Registered Agent

5/12/2022

Date

If signing on behalf of an entity:

Lisa D Dubois, Asst. Secretary

Typed or Printed Name

\*\*\* FILING FEE: \$35.00 \*\*\*

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE  
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