

Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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Division of Corporations

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Account Name : UNISEARCH, INC. (OR)

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

Email Address: gretchen@emergelawgroup.com

REGISTERED AGENT CHANGE CONSOLIDATED VENTURES OF OREGON, INC

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JUL 2 3 2020

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

Statement of 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 Florida in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: CONSOLIDATED VENTURES OF OREGON, INC.
2. The principal office address: 2201 NW Corporate Boulevard, Suite 205, Boch Raton, FL 3343!
3. The mailing address (if different):
4. Date of incorporation/qualification: 01/11/2019 Document number: F19000000313
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)
Angela Letizia
2201 NW Corporate Boulevard, Suite 205
Boca Raton, FL 33431
6. The name and street address of the new registered agent (if changed) and for registered office (if changed);
Unisearch, Inc.
155 Office Plaza Drive
P.O. Box NOT acceptable
Tallahossee, FL 32301
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 comporation has been notified in writing of the change.
Adam Berk, President
Signature of an officer or director Printed or typed name and trite
I hareby 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.
Signature of Registered Agent If signing on behalf of an entity:
Shawn Linan, Assistant Secretary
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)