

**F19 00001724**

Division of Corporations  
 Florida Department of State  
 Division of Corporations  
 Electronic Filing Cover Sheet

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To:

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

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Account Name : COMPUTERSHARE  
 Account Number : 110432003053  
 Phone : (561)694-8107  
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2023 JUN 29 AM 9:09

F19 00001724

**REGISTERED AGENT CHANGE  
 DUR-AMERICA BROKERAGE INC.**

Certificate of Status	0
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Page Count	02
Estimated Charge	\$35.00

2023 JUN 29 PM 8:40

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Corporate Filing Menu

Help

**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 New York \_\_\_\_\_ in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: DUR-AMERICA BROKERAGE INC.
2. The principal office address: 214 W 39TH STREET., SUITE 207 NEW YORK, NY 10018
3. The mailing address (if different): \_\_\_\_\_
4. Date of incorporation/qualification: 03/27/2019 Document number: F19000001724
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)

C T CORPORATION SYSTEM

1200 SOUTH PINE ISLAND ROAD

PLANTATION, FL 33324

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

Corporate Creations Network Inc.

801 US Highway 1

P.O. Box NOT acceptable

North Palm Beach FL 33408

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

Marja Souza, Attorney-in-Fact

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.*

  
Signature of Registered Agent

06/29/2023

Date

If signing on behalf of an entity:

Marja Souza, Special 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)

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