

# F20000001224

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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

From:  
Account Name : REGISTERED AGENTS INC.  
Account Number : I20090000081  
Phone : (307)200-2803  
Fax Number : (855)330-1010

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

Email Address: \_\_\_\_\_

2022 FEB 25 PM 12:33  
SECRETARY OF STATE  
TALLAHASSEE FL

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SECRETARY OF STATE  
TALLAHASSEE FL

## REGISTERED AGENT CHANGE PROJECT PULSO, INC.

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$35.00

RA/RC/chg

FEB 28 2022  
ALBRITTON

## COVER LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: PROJECT PULSO, INC.  
Name of Corporation

DOCUMENT NUMBER: F20000001224

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:

JEROME  
Name of Contact Person

Firm/Company

784 S. CLEARWATER LOOP  
Address

POST FALLS, ID 83854  
City/State and Zip Code

filings@northwestregisteredagent.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

JEROME at (509) 768-2249  
Name of Contact Person 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  
Division of Corporations  
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 DELAWARE in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: PROJECT PULSO, INC.
2. The principal office address: 1901 BRICKELL AVENUE, APT: B-802  
MIAMI, FL 33129
3. The mailing address (if different): 1901 BRICKELL AVENUE, APT: B-802, MIAMI, FL 33129
4. Date of incorporation/qualification: 02/24/2020 Document number: F20000001224
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)

INCorp SERVICES, INC.

17888 67TH COURT NORTH

LOXAHATCHEE, FL 33470

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

NORTHWEST REGISTERED AGENT, LLC

7901 4TH ST. N STE 300

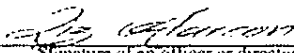
P.O. Box NOT acceptable

DY. PETERSBURG, FL 33702

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**SECRETARY OF STATE**  
**TALLAHASSEE, FL**

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

Liz Alarcon / President

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

02/25/2022

Date

If signing on behalf of an entity:

Tom Glover / Manager

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)