

F210000000698

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

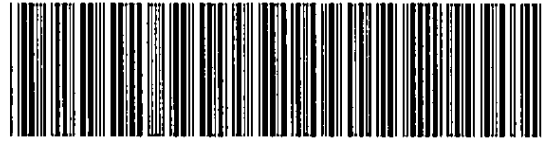
(Business Entity Name)

(Document Number)

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: CIVIELLO COMMUNICATIONS GROUP, INC.
Name of Corporation

DOCUMENT NUMBER: F21000000698

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:

MARY CIVIELLO

Name of Contact Person

CIVIELLO COMMUNICATIONS GROUP, INC.

Firm/Company

701 OLIVE AVE. #817

Address

WEST PALM BEACH, FL 33401

City/State and Zip Code

asulit@bellandcompany.com

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

For further information concerning this matter, please call:

ANA SULIT

Name of Contact Person

at (212) 949-6700

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 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: CIVIELLO COMMUNICATIONS GROUP, INC.
- 2. The principal office address: 701 OLIVE AVE #817, WEST PALM BEACH, FL 33401
- 3. The mailing address (if different): c/o BELL AND COMPANY CPAS PC 122 E 42ND ST, 31 FL, NY NY 10168
- 4. Date of incorporation/qualification: 02/03/2021 Document number: F21000000698
- 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)

MARY CIVIELLO
1111 CENTRAL AVE #517
NAPLES, FL 34102


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

MARY CIVIELLO
701 OLIVE AVE #817
P.O. Box NOT acceptable
WEST PALM BEACH, FL 33401

7/27/2021 11:52 AM

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.

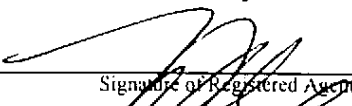


 Signature of an officer or director

MARY CIVIELLO, 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

7/27/2021

 Date

If signing on behalf of an entity:
Mary Civiello

 Typed or Printed Name

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