

F210000001552

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

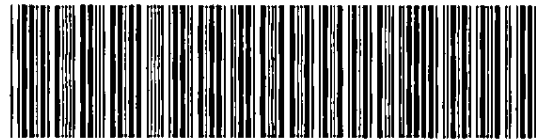
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



500374156895

10/04/21--01026--012 **35.00

2021 OCT 14 PM 3:24
SECRETARY OF STATE
TALLAHASSEE, FL

FILED

Y. Sulker
09/11/2021

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Vittorio Inc
Name of Corporation

DOCUMENT NUMBER: F210000001552

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:

Tommi Heckerla
Name of Contact Person

Vittorio
Firm/Company

8383 Riverdale Ln
Address

Champions Gate FL 33896
City/State and Zip Code

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

For further information concerning this matter, please call:

Shelley Brown at (813) 341.5400
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 _____ in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Vittorio, Inc
2. The principal office address: 8383 Riverdale Ln
Champions Gate Fl 33896
3. The mailing address (if different): 5133 W. Clifton St. Tampa Fl 33634
4. Date of incorporation/qualification: 3/02/2021 Document number: FF20000001552
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)

Michelle Sayegh
5133 W. Clifton St
Tampa Fl 33634

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

Shelley Brown
5133 W. Clifton St
Tampa Fl 33634

P.O. Box NOT acceptable

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]
Signature of an officer or director

Tammi Hakula
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.

Shelley Brown
Signature of Registered Agent

9/30/2021
Date

If signing on behalf of an entity:

Shelley Brown
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)

FILED
2021 OCT 24 PM 3:24
TALLAHASSEE FL
SECRETARY OF STATE