F22000004162

(F	Requestor's Name)			
(/	Address)			
(A	Address)			
(0	City/State/Zip/Phone #)	·		
PICK-UP	☐ WAIT	MAIL		
(E	Business Entity Name)			
(Document Number)				
Certified Copies	Certificates of \$	Status		
Special Instructions to Filing Officer:				
J	HORNE APR 16 2024			

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SECRELABITOR STA



Advanced Incorporating Service

1317 California Street P.O. Box 20396 Tallahassee, FL 32316 Phone: 850-222-CORP Fax: 850-575-2724 Email: wlopez@aisincfl.com Website: www.aisincfl.com

NAME OF ENTITY
Decentralized Engineering Corporation
FOR OFFICE USE ONLY
PICK ONE:
CERTIFIED COPY XXPHOTOCOPYC.U.S.
FILING:
CORPORATIONLLCLIMITED PARTNERSHIPGENERAL PARTNERSHIP
FICTITIOUS NAMESERVICEMARK/TRADEMARKAMENDMENT
FOREIGN QUALIFICATIONJUDGMENT LIEN
XX OTHER Registered Agent Change
RETRIEVAL:
GOOD STANDING CERT/C.U.SCERTIFIED COPYPHOTOCOPY
Of
APOSTILLE/NOTARY CERTIFICATION REQUEST:
Country
Amount of Documents
DATE_4/15/24 TIME
Notes:

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

statement of cha	nge is submitted for a corporation	17.0502, 607.1508, or 617.1508, Florida State organized under the laws of the State of $\frac{Dcle}{registered}$ agent, or both, in the State of Flori	aware		
1. The name of t	he corporation: Decentralized Engi	neering Corporation			
2. The principal MIAMI, FL 3312	office address: 114 NW 25th St, Un	uit #183			
3. The mailing a	ddress (if different):				
4. Date of incorporation/qualification: 06/29/2022 Document number: F22000004162					
	street address of the current regist tment of State: (If resigned, enter n	tered agent and registered office on file with the			
	REGISTERED AGENTS INC.				
	7901 4TH STREET N STE 300				
	ST. PETERSBURG, FL 33702		Apr.	2024 A	
6. The name and (if changed):	street address of the new registere	ed agent (if changed) and /or registered office		2024 APR 15	FILE
	Universal Registered Agents, Inc.		- (4)	<u></u>	0
	1317 California Street		至其	9.5	
	Tallahassee, FL 32304	P.O. Box NOT acceptable	<i>ु</i> .क.	8	
The street addre as changed will	ss of its registered office and the be identical.	street address of the business office of its re	gistered a	igent,	
Such change wa authorized by th	s authorized by resolution duly a e board, or the corporation has be	dopted by its board of directors or by an officen notified in writing of the change.	ccr so		
156 hu		Paul Bohm, CEO			
I hereby accept : I further agree t	o comply with the provisions of a	Printed or typed name and fille ent and agree to act in this capacity. Il statutes relative to the proper and comple he obligation of my position as registered ag e in the registered office address, I hereby co hange.	te perfori ent. Or, onfirm th	mance if this at the	
A	Mer	04/15/2024			
	half of an entity:	Date			
Ashton Villegas	•······, ·				
	ped 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)