

F22 000006531

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

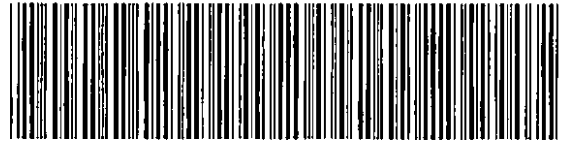
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SECRETARY OF STATE
TALLAHASSEE, FL

Aug 23 2023

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: PREIPO CORP
Name of Corporation

DOCUMENT NUMBER: F22000006531

The enclosed *Affidavit by Foreign Corporation to Change/Add Officer(s) and/or Director(s)* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

ELENA MATTERA

Name of Contact Person

PREIPO CORP

Firm/Company

851 S FEDERAL HWY, SUITE 201

Address

BOCA RATON, FL 33432

City/State and Zip Code

EM@PREIPO.COM

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

For further information concerning this matter, please call:

ELENA MATTERA

at (561) 7233007

Name of Contact Person

Area Code & Daytime Telephone Number

Enclosed is a check made payable to the Florida Department of State for the following amount:

☐ \$35.00 Filing Fee

☒ \$43.75 Filing Fee &
Certificate of Status

☐ \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed)

☐ \$52.50 Filing Fee,
Certificate of Status &
Certified Copy (Additional
copy is enclosed)

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



FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

FILED

2023 JUL 13 AM 8:28

SECRETARY OF STATE
TALLAHASSEE, FL

**AFFIDAVIT BY FOREIGN CORPORATION TO CHANGE/ADD OFFICER(S)
AND/OR DIRECTOR(S)**

(Note: Applicable only during the first calendar year of qualification)

1. The name of the foreign corporation as it appears on the records of the Florida Department of State is:
PREIPO CORP
2. This entity was authorized to transact business in Florida on 10/12/2022 and its Florida document
number is F22000006531
3. This corporation was formed under the laws of WYOMING
4. The name and address of each officer and/or director is as follows:

Title:

Name and Address

VP

ALEXA MAJDALAWI (REMOVE)

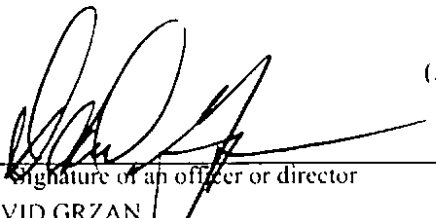
VP

ELENA MATTERA (ADD)

SECRETARY

ELENA MATTERA (ADD)

(Attach additional pages if necessary)


Signature of an officer or director
DAVID GRZAN
Typed or printed name of person signing

PRESIDENT

Title of person signing

FILING FEE \$35

Make checks payable to Florida Department of State and Mail to:
Division of Corporations • PO Box 6327 • Tallahassee, FL 32314