

F24 00000 4654

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: NUIVIO VENTURES INC.

Name of Corporation

DOCUMENT NUMBER: F24000004654

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:

Ghada Skaff, Esq.

Name of Contact Person

Lieser Skaff, PLLC

Firm/Company

403 N. Howard Ave

Address

Tampa, FL 33606

City/State and Zip Code

joseph@jst.law; with cc to neenu.benjamin@ignitho.com

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

For further information concerning this matter, please call:

Ghada Skaff, Esq.

813 280-1256
at () _____

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

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STATE OF FLORIDA
TALLAHASSEE, FL



FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

**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:
NUIVIO VENTURES INC.
2. This entity was authorized to transact business in Florida on 08/29/2024 and its Florida document
number is F24000004654
3. This corporation was formed under the laws of Delaware
4. The name and address of each officer and/or director is as follows:

Title:

P/D

Name and Address

Joseph Olassa

1211 Tech Blvd., #23

Tampa, FL 33619

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DIVISION OF STATE
TALLAHASSEE, FL

Signed by:

Joseph Olassa

Signature of an officer or director

Joseph Olassa

Typed or printed name of person signing

(Attach additional pages if necessary)

Director

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