LH000229525

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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S. CHATHAM
OCT - 4 2025

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FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 4, 2025

EVELIEN LAUWERS
1201 US HWY 1, STE 415
NORTH PALM BEACH, FL 33408 US

SUBJECT: DUCA DEL COSMA, LLC
Ref. Number: L19000229525

We have received your document for DUCA DEL COSMA, LLC, however, upon receipt of your document no check was enclosed. Please return your **document** along with a **check** or **money order** made payable to the Department of State for $25.00.

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

The registered agent must sign accepting the designation.

If you have any further questions concerning your document, please call (850) 245-6050.

Summer Chatham
Supervisor
Amendment Section

Letter Number: 425A00017138

RECEIVED
SEP 15 2025
By

[redacted]

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Duca del Cosma LLC
Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Evelien Lauwers
Name of Person

Duca del Cosma LLC
Firm/Company

1201 US Highway 1 Suite 415
Address

North Palm Beach, FL 33408
City/State and Zip Code

invoices-usa@ducadelcosma.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Evelien Lauwers at (561) 904-6010
Name of Person — Area Code & Daytime Telephone Number

Mailing Address:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Enclosed is a check for the following amount:

☐ $25 Filing Fee ☐ $55 Filing Fee & Certified Copy