

L24000032325

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

20317

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To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : DIPHORA LLC
Account Number : I20220000014
Phone : (786)280-3205
Fax Number : (561)300-0428

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2024 JAN 29 AM 11:34
SECRETARY OF STATE
TALLAHASSEE, FL

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

LLC REGISTERED AGENT CHANGE

SIGMAONE DISTRIBUTION, LLC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$25.00

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2024 JAN 29 AM 10:18

DEPT. OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: SIGMAONE DISTRIBUTION, 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:

HELEN DORNELLAS

Name of Person

NASCIMENTO INTERNATIONAL CORP

Firm/Company

345 BRYAN ROAD

Address

DANIA BEACH, FL 33004

City/State and Zip Code

HELEN@NASCIMENTO.US

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

For further information concerning this matter, please call:

HELEN DORNELLAS 305 586 7975
Name of Person at () 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

((H24000032325 3)))

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR
LIMITED LIABILITY COMPANY

The undersigned, being a member or manager of the limited liability company, certifies that the following information is true and correct: registered office or registered agent or both in the last such filing

1. Name of the limited liability company: SIGMAONE DISTRIBUTION LLC

2. a. 345 BRYAN RD, DANIA BEACH, FL 33004 345 BRYAN RD
b. 345 BRYAN RD, DANIA BEACH, FL 33004 345 BRYAN RD
c. 345 BRYAN RD, DANIA BEACH, FL 33004 345 BRYAN RD
d. 345 BRYAN RD, DANIA BEACH, FL 33004 345 BRYAN RD
e. 345 BRYAN RD, DANIA BEACH, FL 33004 345 BRYAN RD
f. 345 BRYAN RD, DANIA BEACH, FL 33004 345 BRYAN RD
g. 345 BRYAN RD, DANIA BEACH, FL 33004 345 BRYAN RD
h. 345 BRYAN RD, DANIA BEACH, FL 33004 345 BRYAN RD
i. 345 BRYAN RD, DANIA BEACH, FL 33004 345 BRYAN RD
j. 345 BRYAN RD, DANIA BEACH, FL 33004 345 BRYAN RD
k. 345 BRYAN RD, DANIA BEACH, FL 33004 345 BRYAN RD
l. 345 BRYAN RD, DANIA BEACH, FL 33004 345 BRYAN RD
m. 345 BRYAN RD, DANIA BEACH, FL 33004 345 BRYAN RD
n. 345 BRYAN RD, DANIA BEACH, FL 33004 345 BRYAN RD
o. 345 BRYAN RD, DANIA BEACH, FL 33004 345 BRYAN RD
p. 345 BRYAN RD, DANIA BEACH, FL 33004 345 BRYAN RD
q. 345 BRYAN RD, DANIA BEACH, FL 33004 345 BRYAN RD
r. 345 BRYAN RD, DANIA BEACH, FL 33004 345 BRYAN RD
s. 345 BRYAN RD, DANIA BEACH, FL 33004 345 BRYAN RD
t. 345 BRYAN RD, DANIA BEACH, FL 33004 345 BRYAN RD
u. 345 BRYAN RD, DANIA BEACH, FL 33004 345 BRYAN RD
v. 345 BRYAN RD, DANIA BEACH, FL 33004 345 BRYAN RD
w. 345 BRYAN RD, DANIA BEACH, FL 33004 345 BRYAN RD
x. 345 BRYAN RD, DANIA BEACH, FL 33004 345 BRYAN RD
y. 345 BRYAN RD, DANIA BEACH, FL 33004 345 BRYAN RD
z. 345 BRYAN RD, DANIA BEACH, FL 33004 345 BRYAN RD

DANIA BEACH, FL 33004

01/08/2024

L24000020317

Date of filing registration in Florida

Document number

3. (a) EMMERSON RICIERI BRITO

Registered Agent and Registered Office shown in the records of the Florida Dept. of state

Registered Office address: MUST BE FLORIDA STREET ADDRESS

345 BRYAN RD

DANIA BEACH

FL 33004

(b) NASCIMENTO INTERNATIONAL CORPORATION

Former name: NEW Registered Agent and NEW Registered Office address

NEW Registered Office address

345 BRYAN RD

DANIA BEACH

FL 33004

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change or changes were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Emmerson Ricieri Brito
Signature of a filer or authorized representative of a filer

EMMERSON RICIERI BRITO

Printed or typed name of filer

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, regulations, rules, and orders of the Department of State, and I am limited with my acceptance of the appointment as registered agent to the provisions of the Florida Department of State, Chapter 605, F.S., and if this document, I agree that to merely reflect a change in the registered office address. I hereby declare that the limited liability company has been notified in writing of the change.

Signature of filer or authorized representative of a filer

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314

CHANG FEE: \$25.00

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