N15000001804

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RARDCHS

COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT. DBCG INC.

Name of Corporation

DOCUMENT NUMBER, N15000001804

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Yoochul Chong

Name of Contact Person

Firm/Company

5668 E 61st St

Address

Commerce CA 90040

City/State and Zip Code

ychong@attorneyscorpservice.com

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

For further information concerning this matter, please call:

Yoochul Chong

,800

4625487

Name of Contact Person

Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:

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

Street Address:

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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

statement of ch	provisions of sections 607.0502, 617.05 ange is submitted for a corporation orga	mized under the laws of the	State of FL	
	er to change its registered office or regis	tered agent, or both, in the	State of Florida.	
1. The name of	the corporation: DBCG INC.	D PL\/D 101		
	office address: 150 HOMEWOOD BEACH, FL 33445	D BLVD 101		
·,				
3. The mailing	address (if different):			
4. Date of incor	poration/qualification: 02/20/2015	Document number:	N15000001804	
	d street address of the current registered artment of State: (If resigned, enter resign		on file with the	
	CHARLES, BRENDA D			
	1850 HOMEWOOD BLVD 101			
	DELRAY BEACH, FL 33445			
6. The name and (if changed):	d street address of the new registered age	nt (if changed) and /or reg	istered office	
	LEGALING CORPORATE S	ERVICES INC.	<u>.</u>	
	5237 SUMMERLIN COMMO	NS, SUITE 400	M 18: 50	
	P.O. Box NO	l'acceptable		
	FORT MYERS, FL 33907			
The street address changed will	ess of its registered office and the street be identical.	address of the business of	fice of its registered agent,	
Such change wa authorized by th	as authorized by resolution duly adopted ne board, or the corporation has been no	i by its board of directors tified in writing of the cha	or by an officer so ange.	
Br	nde Charles	BRENDA D CHA	RLES _	
Signatu	the appointment as registered agent an to comply with the provisions of all state my distite, and I am familiar with unity is document is being filed merely to refl that the corporation has been notified i	Printed or typed to d agree to act in this capa utes relative to the proper name in the project ect a change in the registe n writing of this change.		
	8 A	4/22/15		
(Sign	nature of Registered Agent	Date		
If signing on be	half of an entity:			
Anna Manu				
r)	yped or Printed Name * * * FILING FE	ኮ∙ ድ 3€ በበ + + +		
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MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314