

N22000007569

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

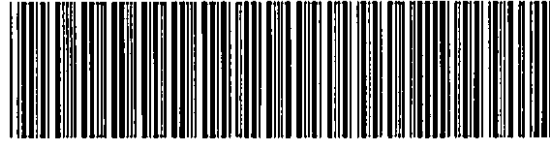
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2023 APR 17 PM 4:34
FILED IN 1000 FL

4/17/2023

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: The Overall Picture Foundation Inc.
Name of Corporation

DOCUMENT NUMBER: N22000007569

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:

Michael D'Adamo

Name of Contact Person

The Overall Picture Foundation Inc.

Firm/Company

2019 7th Ct S

Address

Lake Worth, FL 33461

City/State and Zip Code

kdadamo@topmarketinginc.com

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

For further information concerning this matter, please call:

Christopher A Beaver, CPA

Name of Contact Person

at (215) 550-2958

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
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303



FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 19, 2023

MICHAEL D'ADAMO
2019 7TH COURT S
LAKE WORTH, FL 33461

SUBJECT: THE OVERALL PICTURE FOUNDATION INC.
Ref. Number: N22000007569

We have received your document for THE OVERALL PICTURE FOUNDATION INC. and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

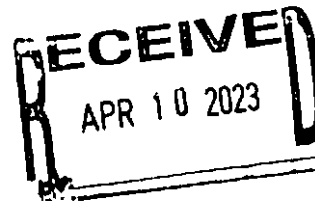
The above entity is a Florida corporation and the document and fee submitted are for a Florida limited liability company. The correct form is enclosed and an additional filing fee of \$10.00 is due.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

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

Claretha Golden
Regulatory Specialist II

Letter Number: 223A00006316



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

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: The Overall Picture Foundation Inc.
2. The principal office address: 2019 7th Ct S Lake Worth, FL 33461
3. The mailing address (if different): _____
4. Date of incorporation/qualification: July 1, 2022 Document number: N22000007569
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

Michael D'Adamo

3003 S Congress Ave Ste 3-A

Lake Worth, FL 33461

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Michael D'Adamo

2019 7th Ct S

P.O. Box NOT acceptable

Lake Worth, FL 33461

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.



Signature of an officer or director

Michael D'Adamo, President

Printed or typed name and title

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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.



Signature of Registered Agent

4/5/2023

Date

If signing on behalf of an entity:

Michael D'Adamo

Typed or Printed Name

*** * * FILING FEE: \$35.00 * * ***

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE

MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

CR2E045 (04/13)