

POO 000 111 006

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

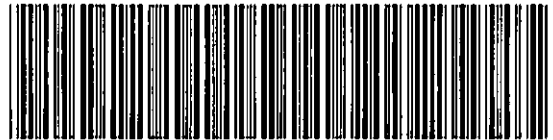
(Business Entity Name)

(Document Number)

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Gold Capital Management, Inc.
Name of Corporation

DOCUMENT NUMBER: P00000111006

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:

Harvey Gold
Name of Contact Person

Firm/Company
5050 N. Ocean Drive #1801

Address
Riviera Beach, FL 33404

City/State and Zip Code
hgold@goldecapitalmgmt.com

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

For further information concerning this matter, please call:

Harvey Gold at (561) 575-0090
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
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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: Gold Capital Management, Inc.
2. The principal office address: 5050 N. Ocean Drive #1801
Riviera Beach, FL 33404
3. The mailing address (if different): _____
4. Date of incorporation/qualification: December 1, 2000 Document number: P00000111006
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)
Harvey P. Gold
379 Eagle Drive
Jupiter, FL 33477

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

5050 N. Ocean Drive #1801

P.O. Box NOT acceptable

Riviera Beach, FL 33404

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.

Harvey Gold
Signature of an officer or director

Harvey P. Gold

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.

Harvey Gold
Signature of Registered Agent

05/19/2021

Date

If signing on behalf of an entity:

Harvey P. Gold

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)

2021 MAY 24 PM 3:10
SECRETARY OF STATE
TALLAHASSEE, FL

FILED