

PO4000023718

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



800302493718

08/14/17--01022--001 **35.00

Acch

AUG 18 2017

R. S.

FILED
17 AUG 14 AM 10:44

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Largo Capital, Inc.
Name of Corporation

DOCUMENT NUMBER: P04000023783

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:

Jessica Reilly
Name of Contact Person

Largo Real Estate Advisors, Inc.
Firm/Company

2420 North Forest Road
Address

Getzville, NY 14068
City/State and Zip Code

jreilly@largocapital.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jessica Reilly at (716) 204-2228
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**

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: Largo Capital, Inc.
2. The principal office address: 8043 COOPER CREEK BOULEVARD,
Suite 208, UNIVERSITY PARK, FL 34201
3. The mailing address (if different): 2430 NORTH FOREST ROAD
Getzville, NY 14068
4. Date of incorporation/qualification: 2/2/2004 Document number: PD4000023753

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)

GARY J. COSCIA
6410 MOORINGS POINT CIRCLE, UNIT #102
BRADENTON, FL 34202

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

GARY J. COSCIA
8043 COOPER CREEK BLVD, Suite 208
UNIVERSITY PARK, FL 34201

P.O. Box NOT acceptable

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]

(Signature of an officer or director)

GARY J. COSCIA 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]

(Signature of Registered Agent)

8/7/2017

Date

If signing on behalf of an entity:

Typed or Printed Name

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