

POS000081278

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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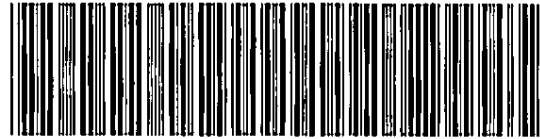
(Business Entity Name)

(Document Number)

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DIVISION OF CORPORATE &
2020 FEB 24 AM 7:26

QM
3/11/20

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Disaster Inc
Name of Corporation •

DOCUMENT NUMBER: PO5000081278

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:

Vincent Lorenzo
Name of Contact Person

Disaster Inc
Firm/Company

PO Box 824
Address

Clifton Park NY 12065
City/State and Zip Code

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

For further information concerning this matter, please call:

Noelle Long Esq at (578) 289-0244
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: Disaster Inc
2. The principal office address: 2051 SE 3rd St #501
Deerfield Beach FL 33441
3. The mailing address (if different): PO Box 824, Clifton Park NY 12065
4. Date of incorporation/qualification: 6/3/2005 Document number: PO5000081278
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)

Berghley, Myrick & Udell, PA
1255 W. Atlantic Blvd, Ste 314
Pompano Beach FL 33069

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

William Tittle
155 SE 5th Ct H 6
P.O. Box NOT acceptable
Deerfield Beach FL 33441

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DIVISION OF CORPORATIONS
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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.

Vincent Lorenzo
Signature of an officer or director

Vincent Lorenzo, 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.

William Tittle
Signature of Registered Agent

2/10/20
Date

If signing on behalf of an entity:

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)