

PO6 000019693

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

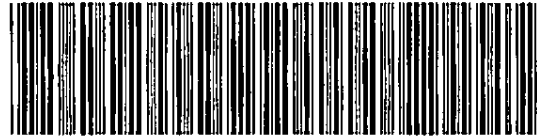
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FL

O SIMMONS  
FEB 10 2022

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** DBSS, INC.  
Name of Corporation

**DOCUMENT NUMBER:** P06000019693

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:

SCOTT SANTOMAURO

Name of Contact Person

DBSS, INC.

Firm/Company

3662 AVALON PARK EAST BLVD SUITE 2072

Address

ORLANDO, FL. 32828

City/State and Zip Code

SCOTTSS@DBSSINC.COM

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

For further information concerning this matter, please call:

SCOTT SANTOMAURO

Name of Contact Person

at ( 321 ) 2817109

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: DBSS, INC
2. The principal office address: 3662 AVALON PARK EAST BLVD SUITE 2072, ORLANDO, FL 32828
3. The mailing address (if different): SAME
4. Date of incorporation/qualification: 2/09/06 Document number: P06000019693
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)

SPIEGEL & UTRERA, P.A.

1840 SW 22ND ST., 4TH FLOOR

MIAMI, FL 33145

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

SCOTT SANTOMAURO

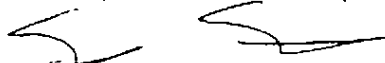
3662 AVALON PARK EAST BLVD SUITE 2072

P.O. Box NOT acceptable

ORLANDO, FL 32828

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

SCOTT SANTOMAURO

\_\_\_\_\_  
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

1/24/22

\_\_\_\_\_  
Date

If signing on behalf of an entity:

SCOTT SANTOMAURO

\_\_\_\_\_  
Typed or Printed Name

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE  
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6527, TALLAHASSEE, FL 32314  
CR2E045 (04/13)

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2022 JAN 31 AM 6:43  
SECRETARY OF STATE  
TALLAHASSEE, FL