

PO6000050574

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

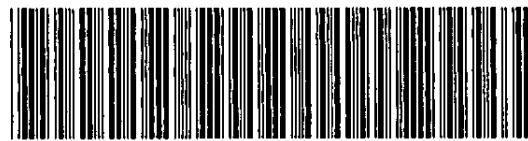
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TALLAHASSEE, FLORIDA

12 JUL 27 PM 3:43

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: DiRienzo Investment Group Inc.

Name of Corporation

DOCUMENT NUMBER: P06000150574

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:

Brian DiRienzo

Name of Contact Person

DiRienzo Investment Group Inc.

Firm/Company

4345 SE Cove Lake Circle, Suite 206

Address

Stuart, FL 34997

City/State and Zip Code

dirienzo@bellsouth.net

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

For further information concerning this matter, please call:

Brian DiRienzo

Name of Contact Person

772 219-8114

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 _____ in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: DiRienzo Investment Group Inc.
2. The principal office address: 4345 SE Cove Lake Circle, Suite 206, Stuart, FL 34997

3. The mailing address (if different): _____

4. Date of incorporation/qualification: 12/06/2006 Document number: P06000150574

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)
Brian DiRienzo
5476 Enclave Crossing Way, Suite C-6
Delray Beach, FL 33484

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
4345 SE Cove Lake Circle, Suite 206, Stuart, FL 34997

P.O. Box NOT acceptable

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TALLAHASSEE, FLORIDA

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.

Brian M. DiRienzo
Signature of an officer or director

Brian DiRienzo, 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.

Brian M. DiRienzo
Signature of Registered Agent

7/20/2012

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 (03/12)