

PO7000053776

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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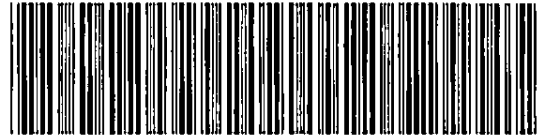
(Business Entity Name)

(Document Number)

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: COAST TO COAST DESIGNS, INC.

Name of Corporation

DOCUMENT NUMBER: P07000053776

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:

PHILIP JOSEPHSON

Name of Contact Person

STERLING BUSINESS LAW

Firm/Company

2665 S. BAYSHORE DRIVE, PH2B

Address

MIAMI, FL 33133

City/State and Zip Code

pjosephson@sterlingbusinesslaw.com

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

For further information concerning this matter, please call:

PHILIP JOSEPHSON

Name of Contact Person

at (305) 2857970

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: COAST TO COAST DESIGNS, INC.

2. The principal office address: 2332 GALIANO STREET, 2nd FLOOR
CORAL GABLES, FL 33134

3. The mailing address (if different): _____

4. Date of incorporation/qualification: MAY 3, 2007 Document number: P07000053776

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)

DOUGLAS OLSON

3006 AVIATION AVE., SUITE 3B

MIAMI, FL 33133

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

DOUGLAS OLSON

2332 GALIANO STREET, 2nd FLOOR

P.O. Box NOT acceptable

CORAL GABLES, FL 33134

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.

Doug Olson

6015FE0A1EC01F8

Signature of an officer or director

DOUGLAS OLSON, 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.

DocuSigned by:

Doug Olson

8915FE8A7EC01F8

Signature of Registered Agent

10/17/2018 10:09:16 AM PDT

Date

If signing on behalf of an entity:

Typed or Printed Name

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