11/10/2022 11:59 AM TO:18506176380 FROM:5616272236 Page:

Department of State

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H22000384382 3)))



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To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name : NASON, YEAGER, GERSON, WHITE & LIOCE, P.A.:

Account Number : 073222003555

: (561)686-3307

Phone Fax Number

: (561)290-1590

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

## REGISTERED AGENT CHANGE NATIONAL COST, INC.

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$35.00

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Page: 2 11/10/2022 11:59 AM TO:18506176380

FROM: 5616272236

FAN: H22000384382 3

## **COVER LETTER**

TO:	Amendment Section		
	Division of Corporations		

SUBJECT: NATIONAL COST, INC.		
Name of Corporation	<u></u>	
DOCUMENT NUMBER: P12000022104		· · · · · · · · · · · · · · · · · · ·
The enclosed Statement of Change of Registered Office/a	Agent and fe	ce are submitted for filing.
Please return all correspondence concerning this matter to	o the follow	ring:
Jeffrey M. Garber, Esq.		
Name of Contact Person		
Nason Yeager Gerson Harris & Fumero, P.A.		
Firm/Company		
3001 PGA Blvd., Suite 305		
Address		
Palm Beach Gardens, FL 33410		
City/State and Zip Code		
lferry@ntgadvantage.com		
E-mail address: (to be used for future annual report i	notification	1)
For further information concerning this matter, please cal	ll:	
Susie Daversa	at (561	) 686-3307 Tode & Daytime Telephone Numbe
Name of Contact Person	Area C	ode & Daytime Telephone Numbe

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

Amendment Section
Division of Corporations
The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Street Address:

CR2E045 (04/13)

FAN: H22000384382 3

TO:18506176380

FROM: 5616272236

## FAN: H22000384382 3 STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of char	provisions of sections 607,0502, 617,0502, 607,1508, or 617,1508, Florida Statutes, this nge is submitted for a corporation organized under the laws of the State of Florida to change its registered office or registered ugent, or both, in the State of Florida.			
1. The name of ti	he corporation: NATIONAL COST, INC.			
2. The principal	office address: 6801 Lake Worth Road, Suite 214, Lake Worth, FL 33467			
3. The mailing a	ddress (if different):			
4. Date of incorp	oration/qualification: 03/05/2012 Document number: P12000022104			
	street address of the current registered agent and registered office on file with the trnent of State: (If resigned, enter resigned)			
	Lee Ferry			
	6801 Lake Worth Road, Suite 214			
	Lake Worth, FL 33467			
6. The name and (if changed):	street address of the new registered agent (if changed) and for registered office			
	Jeffrey M. Garber, Esq. c/o Nason Yeager Gerson Harris & Fumero, P.A.			
	SWITTER BIVE, Salte 505			
	P O, Box NOT acceptable Palm Beach Gardens, FL 33410			
The street addre as changed will	ss of its registered office and the street address of the business office of its registered agent, be identical.			
Such change wa authorized by	sauthorized by resolution duly adopted by its board of directors or by an officer so board, or the corporation has been notified in writing of the change.			
My	Lee Ferry, Chairman/Director			
I hereby accept I further agree t of my duties, an document is beil corporation hay	the appointment as registered agent and agree to act in this capacity: o comply with the provisions of all statutes relative to the proper and complete performance of I am familiar with and accept the obligation of my position as registered agent. Or, if this not filed merely the reflect a change in the registered office address, I hereby confirm that the been notified it writing of this change.  Date  Date			
	half of an entity:			
Ту	sped 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)