

P120000 81043

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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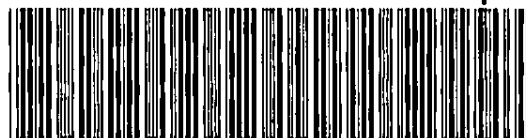
(Business Entity Name)

(Document Number)

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: COLLAB INC
Name of Corporation

DOCUMENT NUMBER: P 120 000 81 043

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:

FRANCISCO CANESTRI
Name of Contact Person

Firm/Company

1121 CRANDON BLVD, APT E101
Address

KEY BISCAYNE, FL 33149
City/State and Zip Code

FCANESTRI@COLLABANDCO.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

FRANCISCO CANESTRI at (347) 371 2131
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: COLLAB INC.
2. The principal office address: 848 BRICKELL AVENUE, SUITE 200, MIAMI, FL 33131
3. The mailing address (if different): 1121 CRANDON BLVD. APT E101, KEY BISCAYNE, FL 33149
4. Date of incorporation/qualification: 09/24/2012 Document number: P12000081043

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)

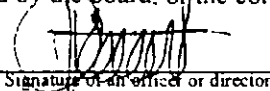
CORPORATE CREATIONS NETWORK, INC
11390 PROSPERITY FARMS ROAD #221E
PALM BEACH GARDENS, FL 33140

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

FRANCISCO CAVESTRI
1121 CRANDON BLVD. APT E101
P.O. Box NOT acceptable
KEY BISCAYNE, FL 33149

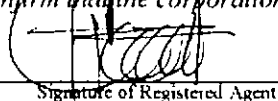
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

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

FRANCISCO CAVESTRI
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

01/07/2019
Date

If signing on behalf of an entity:

Typed or Printed Name

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

19 JAN 24 PM 2:01

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