

P13000037247

(Requestor's Name)

D. ESCORPIO CORPORATION

2700 NW 43rd St, Ste B
Gainesville, FL 32606

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

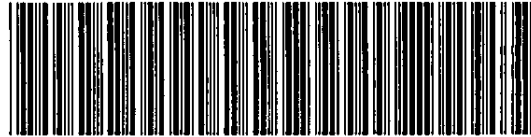
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



900295007189

03/03/17--01008--023 **35.00

FILED
2017 MAR -3 PM 1:34
CLERK OF STATE
TALLAHASSEE, FL 32301

3/6/17

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: D. E. Scorpio Corporation
2. The principal office address: 2700 NW 43rd Street, Suite B, Gainesville, FL 32606
3. The mailing address (if different): _____

4. Date of incorporation/qualification: 4/24/2013 Document number: P13000037247

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)

Butts, Robert P, ESQ

5200 SW 91st Terrace Ste 101

Gainesville, FL 32608

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

Niesen, Donald

5216 SW 91st Drive

P.O. Box NOT acceptable

Gainesville, FL 32608

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

Domenic Scorpio - 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.



Signature of Registered Agent

Niesen, Price, Worthy, Campo, P.A.

Date

FEB 22, 2017

If signing on behalf of an entity:

5216 S.W. 91st Drive
Gainesville, FL 32608

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

FILED
2017 MAR -3 PM 1:34
TALLAHASSEE
FLORIDA
CLERK OF THE CIRCUIT COURT