P130000 49649

(Req	uestor's Name)	
(Add	iress)	
(Add	lress)	
(City	/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bus	iness Entity Na	me)
(Doc	ument Number)
Certified Copies	Certificate	s of Status
Special Instructions to F	iling Officer:	

Office Use Only



200364769332

RECEIVED
MAY 0 3 2021

05/04/21--01003--016 **35.00

2021 MAY -3 AM IO: 32
SECRETARY OF STATE
TALL ABASSES SA

6/4/21



CSC - WILMINGTON
251 Little Falls Drive
Wilmington De 19808

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Ami Casper ami.casper@cscglobal.com

Date: April 28, 2021

Order#: 778813/167

Re: DBCI CORP.

Enclosed please find:

XX Change of Registered Agent and Office.

XX _ Check in the amount of \$35 _.

Please take the following action:

XX File in your office on a routine basis.

XX Issue Proof of Filing.

XX Return Regular Mail in the enclosed envelope.

Attn:Ami Casper c/o Corporation Service Company 251 Little Falls Drive Wilmington, DE 19808

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

INCA.XCOA

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	mge is submi	sections 607.0502, 617.6 Hed for a corporation org Is registered office or reg	ganized under the lav	vs of the State of	r_Florida	_	
1. The name of (the corporatio	DBCI CORP.					
2. The principal	office addres	s: 130 Royal Street, Car	nton, MA 02121				
3. The mailing a	iddress (if dif	ferent):					
4. Date of incorp	f incorporation/qualification: 06/06/2013 Document number: P13000049649						
5. The name and	l street addre:	ss of the current registered e: (If resigned, enter resig	d agent and registere				
	C T Corpor	ation System					
	1200 South	Pine Island Road		-	_		
	Plantation		FL	33324			
6. The name and (if changed):		ss of the new registered at a Service Company	gent (if changed) and	d /or registered o	SECH TAIL		
	1201 Hays	Street			144		
P.O. Box, NOT acceptable						1	
	Tallahasse		FL	32301	- 0.5 - 0.5		
		stered office and the stre				ent,	
Such change was authorized by the	is authorized ie board, or t	by resolution duly adop he corporation has been	ted by its board of d notified in writing o	lirectors or by a of the change.	n officer so		
Xies	(P)	Onie	Jill Cilmi, Vice	President			
Silmatui	re of an officer or	director	Printe	ed or typed name and	title	_	
I further agree i of my duties, an document is bei	to comply wi d I am famili ng filed merc : been notifie	nent as registered agent of the provisions of all star with and accept the of the to reflect a change in dim writing of this change on Dany	atutes relative to the bligation of my posi the registered office	e proper and co	mplete performa ed agent. Or, if 2by confirm that	mce this the	
By: Ce	iml	el	04/28/2021				
Signing on be	nature of Register half of an en	_		Date			
Ami M. Casper,		•					
T	ped or Printed N	ame					

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