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## **COVER LETTER**

TO: Amendment Section Division of Corporations

<sub>subject:</sub> VeriWealth I	ncorporated	
	Name of Corporation	
DOCUMENT NUMBER: P180	000012094	

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:

## Name of Contact Person Firm/Company 1490 W Central Ave Address Merritt Island Florida 32952 City/State and Zip Code nathankazman1@gmail.com

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

For further information concerning this matter, please call:

Nathan Kazman

Name of Contact Person

Name of Contact Person

at (321 ) 626-7787

Area Code & Duytime 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

## CTATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

•	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508. Florida Statutes, this ange is submitted for a corporation organized under the laws of the State of Florida	
	er to change its registered office or registered agent, or both, in the State of Florida.	
1. The name of t	the corporation: VeriWealth Incorporated	
2. The principal	office address: 1490 W Central Ave Merritt Island, Florida 32952	
3. The mailing a	address (if different):	
4. Date of incorp	poration/qualification: 02/05/18 Document number: P18000012094	<del></del>
	d street address of the current registered agent and registered office on file with the rtment of State: (If resigned, enter resigned)	
	Business Filings Incorporated	
	1200 South Pine Island Road	
	Plantation, Florida	:-1
6. The name and (if changed):	Plantation, Florida  d street address of the new registered agent (if changed) and /or registered office  23	コニュラ
	Nathan Kazman  1490 W Central Ave	رسا
	P.O. Box NOT acceptable  Merritt Island, FL 32952	
The street addre	ess of its registered office and the street address of the business office of its registered agent, l be identical.	
Such change wa	as authorized by resolution duly adopted by its board of directors or by an officer so he board, or the corporation has been notified in writing of the change.	
allema	Nathan Kazman, Director  Printed or typed name and title	
I hereby accept I further agree t performance of agent Or if thi	t the appointment as registered agent and agree to act in this capacity. to comply with the provisions of all statutes relative to the proper and complete my duties, and I am familiar with and accept the obligation of my position as registered is document is being filed merely to reflect a change in the registered office address, I what the corporation has been notified in writing of this change.	
Malla	12/18/18	
	nature of Registered Agest Date	
	chalf of an entity:	
Nathan Kaz	STREET Typed or Printed Name	

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. Box 6327, TALLAHASSEE, FL 32314

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