

P18000045622

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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☐ MAIL

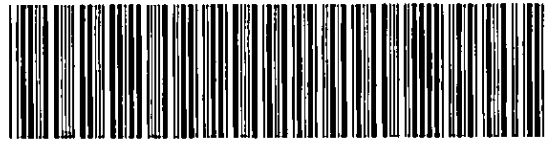
(Business Entity Name)

(Document Number)

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DEC 18 2018

## COVER LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: Cityscape Executive Suites Inc.  
Name of Corporation

DOCUMENT NUMBER: P18000045622

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:

Brittani Williams  
Name of Contact Person

Cityscape Executive Suites Inc.  
Firm/Company

1050 Starkey Rd. #2306  
Address

Largo, FL 33771  
City/State and Zip Code

Brittani Williams12@gmail.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Brittani Williams at ( 305 ) 710-1720  
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: Cityscape Executive Suites Inc.  
2. The principal office address: 1611 Meridian Ave. #103 Miami Beach, FL  
33139  
3. The mailing address (if different): \_\_\_\_\_

4. Date of incorporation/qualification: 5/16/18 Document number: PIR 000045627  
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)

Letcano, Sarah  
14601 Knoll Ridge Dr.  
Tampa, FL 33625

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

Williams, Brittari  
1050 Starkey Rd # 2306  
P.O. Box NOT acceptable  
Largo, FL 33771


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TALLAHASSEE, FL

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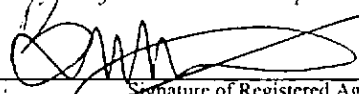
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

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

Brittari Williams - Director  
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

December 10, 2018  
Date

If signing on behalf of an entity:

Brittari Williams  
Typed or Printed Name