

12/3/2020

Division of Corporations

Florida Department of State  
Division of Corporations  
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To:

Division of Corporations  
Fax Number : (850)617-6380

From:

Account Name : ALLSTATE CORPORATE SERVICES CORP  
Account Number : I20040000031  
Phone : (800)906-9220  
Fax Number : (800)906-9880

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: \_\_\_\_\_

**REGISTERED AGENT CHANGE  
DARIA RAE INC.**

Certificate of Status	1
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## COVER LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: DARIA RAE INC.

Name of Corporation

DOCUMENT NUMBER: P18000073031

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:

STEVEN WEISS

Name of Contact Person

ALLSTATE CORPORATE SERVICES CORP.

Firm/Company

2215 Hendrickson Street

Address

Brooklyn, NY 11234

City/State and Zip Code

FILING@ACS123.COM

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

For further information concerning this matter, please call:

SAL ABECASIS

Name of Contact Person

at ( 800 ) 906-9220

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  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

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: DARIA RAE INC.  
2. The principal office address: 1314 E LAS OLAS BLVD, FORT LAUDERDALE, FL 33301

3. The mailing address (if different): 1314 E LAS OLAS BLVD, UNIT #2129, FORT LAUDERDALE, FL 33301

4. Date of incorporation/qualification: 08/27/2018 Document number: P18000073031

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)

DARIA R BERENATO

18201 PINE HAMMOCK BLVD.

LUTZ, FL 33548

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

Registered Agent Solutions, Inc.

155 Office Plaza Dr. Suite A

P.O. Box NOT acceptable

Tallahassee, FL 32301

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.

X   
Signature of an officer or director

DARIA R BERENATO, 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

11/27/2020

Date

If signing on behalf of an entity:

STEVEN WEISS, ASSISTANT SECRETARY

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  
CR2E045 (04/13)