## P19000030747

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## **COVER LETTER**

TO: Ai	mendment Section ivision of Corporations	
SUBJECT Name of C	Γ: NEST International, Inc. Corporation	
DOCUMI	ENT NUMBER: P19000030747	· · · · · · · · · · · · · · · · · · ·
The enclos	sed Statement of Change of Registered	d Office/Agent and fee are submitted for filing.
Please retu	irn all correspondence concerning this	s matter to the following:
Philipp E. I	Kaeferle	
Name of C	Contact Person	<del></del>
NEST Inter	rnational, Inc.	
Firm/Com	pany	
75 Vineyar	ds Boulevard, 4th Floor	
Address		<del></del>
Naples, FL		
City/State	and Zip Code	<del>-</del>
	philipp.kacferle@enternest.co	om
E-mail ad	ldress: (to be used for future annua	l report notification)
For furthe	r information concerning this matter.	please call:
Philipp Ka		at ( 856 ) 720-5177  Area Code & Daytime Telephone Number
	Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed i	is a \$35.00 check made payable to the	Department of State.
	Mailing Address: Amendment Section	Street Address: Amendment Section
Amendment Section Division of Corporations		Division of Corporations
	P.O. Box 6327	The Centre of Tallahassee
	Talfahassee, FL 32314	2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

CR2E045 (04/13)

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

statement of cha	nge is submitted for a co	orporation organized u	.1508, or 617.1508, Florida nder the laws of the State of gent, or both, in the State of	/ Florida			
1. The name of t	he corporation: NEST In	iternational, Inc.					
2. The principal	office address: 75 Viney	ards Boulevard, 4th floo	r, Naples, FL 34119				
3. The mailing a	ddress (if different):						
4. Date of incorporation/qualification: 4/11/19 Document number: P19000030747							
	I street address of the cur tment of State: (If resign		nd registered office on file	with the			
	Wood, Buckel & Carmic	hael		_			
	2150 Goodlette Road North, Sixth Floor						
	Naples, FL 34102				202		
6. The name and (if changed):	I street address of the ne	w registered agent (if c	hanged) and /or registered o	LL MASS	2022 JUN 28	71	
	Philipp E. Kaeferle			_ - 변화 - *	72	П	
	75 Vineyards Boulevard,	4th Floor			=		
	Naples. FL 34119	P.O. Box NOT a	eceptable	RIB'A	58		
The street addre	ess of its registered offic be identical/1	e and the street addre	ss of the business office of	its regis	tered a	gent,	
	. /		s board of directors or by a in writing of the change.				
Robert J. Almond, CEO							
	re of an officer or director	<del></del>	Printed or typed name and	title			
I further agrée a of my duties, an document is bei	the appointment as reg to comply with the prov d I am familiar with an ng filed merely to reflec been notified in writin	isions of all statutes re d accept the obligation of a change in the regi	ee to act in this capacity, elative to the proper and co n of my position as register stered office address, I her	omplete pred agen reby conf	erforn t. Or. i irm tha	iance if this it the	
Chilips	Karfar	Jun	20, 2022				
Shg	nature of Registered Agent		Date				
If signing on be	half of an entity:						
Philipp E. Kaefer	de						
I.	yped or Printed Name						
	*	* * FILING FEE: \$3	5.00 * * *				

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