Florida Department of State

Division of Corporations **Electronic Filing Cover Sheet**

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To:

Division of Corporations

Fax Number : (850)617-6380

From:

R. WHITE

Account Name : CAPITOL SERVICES, INC.

Email Address:

Account Number : 120160000017

: (855)498-5500 Phone

WW 0 6 20:3

Fax Number : (800)432-3622

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

REGISTERED AGENT CHANGE DECURTIS INVESTMENTS, INC.

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$35.00

COVER LETTER

TO:

Amendment Section Division of Corporations

SUBJECT: DeCurtis Investments, Inc.

Name of Corporation

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:

Adria Dillon

Name of Contact Person

Bold Legal LLC

Firm/Company

1600 Broadway, Suite 1550

Denver, CO 80202

City/State and Zip Code

adillon@bold.legal

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

For further information concerning this matter, please call:

Adria Dillon

at (720 745-4268 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

CR2E045 (03/12)

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

Pursuant to the provisions of sections 607.0502, 617.05 statement of change is submitted for a corporation organization.	
in order to change its registered office or regis	• • • • • • • • • • • • • • • • • • • •
1. The name of the corporation: DeCurtis Investm	nents, Inc.
2. The principal office address: 3208 East Coloni	al Drive, Suite C190, Orlando, FL 32803
· ·	
3. The mailing address (if different):	
4. Date of incorporation/qualification: 4/24/2019	Document number: P19000034479
5. The name and street address of the current registered Florida Department of State: (If resigned, enter resign	agent and registered office on file with the
CAPITOL CORPORATE SE	ERVICES, INC.
515 EAST PARK AVENUE,	2ND FLOOR - 20
TALLAHASSEE, FL 32301	2ND FLOOR
6. The name and street address of the new registered ag (if changed):	
Miriam Hollman	
3208 East Colonial Drive, Suite C190	
P.O. Box NO	YF acceptable
Orlando, FL 32803	
The street address of its registered office and the stree as changed will be identical.	t address of the business office of its registered agent,
Such change was authorized by resolution duly adopte authorized by the board, or the corporation has been n	ed by its board of directors or by an officer so officed in writing of the change.
Springher of an officer or director	David DeCurtis, President and CEO
I hereby accept the appointment as registered agent a I further agree to comply with the provisions of all sta performance of my duties, and I am familiar with and agent. Or, if this document is being filed merely to ref hereby confirm that the corporation has been notified	•••
Signiture of Registered Agent	5/2/2019
If signing on behalf of an entity:	2-00-
Miriam Holleman	
Typed or Printed Name	
* * * FILING FI	EE: \$35.00 * * *

Make Checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 Cr2e045 (03/12)