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(Re	questor's Name)	
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SECRETARY OF STATE
TALLAWASCEE TA

2/12/21

COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: DEC Goldner, Inc Name of Corporation
DOCUMENT NUMBER: \$200000 32.35
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:
Manny Goldman
Name of Contact Person
Firm/Company TB Fronterland Tour
Address Porte Vela FL 32081
City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Name of Contact Person at (516) 051-32-58 Area Code & Daytime Telephone Number
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 The Centre of Tallahassee 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

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	
in order to change its registered office or registered agent, or both, in the State of Florida.	
1. The name of the corporation: 2. The principal office address: T8 Forty (and Trul) Qorte Vellon FL 32081	_
2. The principal office address: B fronter land Trul	
Ponte Velm Fl 32081	_
	_
3. The mailing address (if different): 4. Date of incorporation/qualification: 1/17/20 Document number: P2000000323	, <u>د</u> _
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)	
NRAI Services Fro	
NRAI Services Fre 1200 Sorth Pine Island Plantation FL 33324	
Plantation FL 33324 SE SE	
6. The name and street address of the new registered agent (if changed) and /or registered office AR (if changed):	
Many Goldnan SSC H. S.	
58 frontiland Drud = 3 00	
Many Goldnar 18 Grantwland Treel 19 Exp. 19 Box NOT acceptable Porte Verlan Fr. 32091	
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. Man my Goldman	
Signature of an officer or 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 the 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.	e is e
Signature of Registered Agent Date	
Signature of Registered Agent Date	
If signing on behalf of an entity:	
Typed or Printed Name	

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