

P20000003272

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

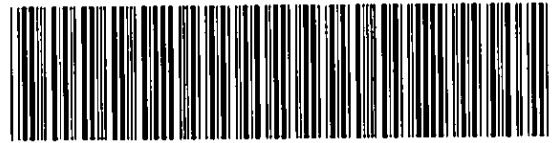
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer

Office Use Only



400438121854

FILED

2024 OCT 17 AM 10:29

TALLAHASSEE, FLORIDA

RECEIVED

2024 OCT 17 PM 2:48

SECRETARY OF STATE
TALLAHASSEE, FL.

Incorporating Services, Ltd.

1540 Glenway Drive
Tallahassee, FL 32301
850.656.7956
Fax: 850.656.7953
www.incserv.com

incserv

ORDER FORM

TO Florida Department of State
The Centre of Tallahassee
2415 North Monroe Street, Suite 810
Tallahassee, FL 32303
corphelp@dos.myflorida.com
850-245-6051

FROM Melissa Moreau

850.656.7953

REQUEST DATE 10/17/2024

PRIORITY Regular Approval

OUR REF # (Order ID#) 1301632

ORDER ENTITY

COMITIA MSA CORP

PLEASE PERFORM THE FOLLOWING SERVICES:

COMITIA MSA CORP (FL)

File the attached change of agent document

NOTES:

\$35.00 Authorized

RETURN/FORWARDING INSTRUCTIONS:

ACCOUNT NUMBER: I20050000052

Please bill the above referenced account for this order.

If you have any questions please contact me at 656-7956,

Sincerely,



Please bill us for your services and be sure to include our reference number on the invoice and courier package if applicable. For UCC orders, please include the thru date on the results.

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: COMITIA MSA CORP
2. The principal office address: 20900 NE 30th Avenue 8th Floor Aventura, Florida 33180

3. The mailing address (if different): _____

4. Date of incorporation/qualification: 01/17/2020 Document number: P20000003272

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)

VDI CORPORATE SERVICES LLC

150 SE 2ND AVE, STE 905

MIAMI, FL 33131

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

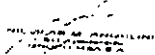
FBM INTERNATIONAL ADVISORY LLC

66 W Flagler Street 9th Floor MIAMI, FL 33130

P.O. Box: NOT acceptable

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

Nicolas Angelini

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

10/16/2024

Date

If signing on behalf of an entity:

Fabian Birnbaum

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

CR21:045 (04/13)

FILED
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TALLAHASSEE, FLORIDA