

P2C 0000 95446

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

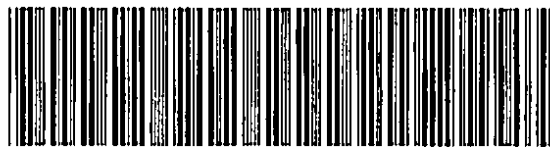
Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Q. SILAS

11/22/21

Office Use Only



400376300074

11/22/21--01017--001 **35.00

FILED
2021 NOV 22 PM 6:08
SECRETARY OF STATE
TALLAHASSEE, FL

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: BRECCIA CORP.
Name of Corporation

DOCUMENT NUMBER: P20000095446

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:

HENRIQUE ROJAS

Name of Contact Person

BRECCIA CORP.

Firm/Company

4300 BISCAYNE BLVD. SUITE 203

Address

MIAMI / FL / 33137

City/State and Zip Code

HR@BRECCIA.CO

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

For further information concerning this matter, please call:

HENRIQUE ROJAS

Name of Contact Person

at (305)

6088129

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: BRECCIA CORP.
2. The principal office address: 4300 BISCAYNE BLVD. , SUITE 203
MIAMI, FL, 33137
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 12/04/2020 Document number: P20000095446
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)

REGISTERED AGENTS INC.

7901 4TH ST NSTE 300ST.

PETERSBURG, FL, 33702

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

HENRIQUE ROJAS

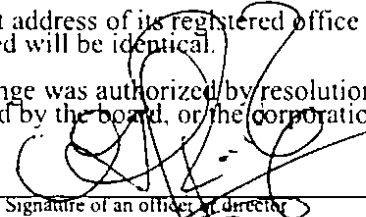
4300 BISCAYNE BLVD. SUITE 203

P.O. Box NOT acceptable

MIAMI, FL, 33137

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

HENRIQUE ROJAS

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

11/16/2021

Date

If signing on behalf of an entity:

HENRIQUE ROJAS

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)

2021 NOV 22 PM 4:08
SECRETARY OF STATE
TALLAHASSEE, FL

FILED