P21000068440

(Requestor's Name)					
(Address)					
(Ad	idress)				
(Cit	ty/State/Zip/Phone	e #)			
PICK-UP	MAIT	MAIL			
(Business Entity Name)					
(Document Number)					
Certified Copies	Certificates of Status				
Special Instructions to Filing Officer:					
iverdinare	Ч				

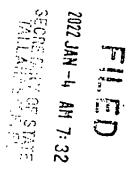
Office Use Only



800375559608

08/26/21--01913--021 **25.00

01/04/22--01034--013 **10.00



A. BUTLER
JAN 1 2 2022

COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: Doger Technology Inc.		
Na	me of Limited	l Liability Company
Dear Sir or Madam:		
The enclosed Registered Agent/Registered Of	ffice Change a	nd fee(s) are submitted for filing.
Please return all correspondence concerning the	his matter to t	he following:
Victoria Padron		
Name of Person		
ZenBusiness Inc.		
Firm/Company		
336 E. College Ave. Ste 301		
Address		
Tallahassee, FL 32301		
City/State and Zip Code		
fulfillment@zenbusiness.com		
E-mail address: (to be used for future an	nual report no	nification)
For further information concerning this matter	r, please call:	
Victoria Padron	844 at (493-6249
Name of Person		Area Code & Daytime Telephone Number
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303
Enclosed is a check for the followin	g amount:	
□ \$25 Filing Fee		\$55 Filing Fee & Certified Copy
INHS18 (2/14)		

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

-	provisions of sections 607.0502, inge is submitted for a corporati				tutes, th	ı L S
Fl in orde	r to change its registered office	or registered ag	ent, or both, in the	State of Flor	rida.	
1. The name of t	the corporation: Dogtor Technological	ogy Inc.				
2. The principal	office address: 1317 Edgewater I	Drive #4941 Orla				
3. The mailing a	ddress (if different): 1317 Edgev	water Drive #494	l Orlando, FL 32804	4		
4. Date of incorp	poration/qualification: 07/08/202	21 D	ocument number:	P210000684	40	
	I street address of the current reg trnent of State: (If resigned, ente		d registered office	on file with t	the	
	PRODEZK INC			(j)	202	
	848 BRICKELL AVE STE 950				2022 JAN -1	- 11
	MIAMI, FL 33131		 -	ARS	+	(att a
6. The name and (if changed):	d street address of the new regist	ered agent (if ch	anged) and /or regi	istered office		O
	Registered Agents Inc.	·			ა 2	
	7901 4th St N STE 300					
		P.O. Box NOT acc	ceptable			
	St. Petersburg, FL 33702					
The street address changed will	ess of its registered office and the identical.	he street address	s of the business of	ffice of its re	egistere	d agent,
Such change wa authorized by th	as authorized by resolution duly ne board, or the corporation has	y adopted by its s been notified in	board of directors writing of the cha	or by an off ange.	icer so	
/s/ Ricardo V Mandini SR		Ricar	Ricardo V Mandini SR, President			
Signatu	re of an officer or director		r maco or typod	nume uno uno		
I hereby accept I further agree (of my duties, an document is bei corporation has	the appointment as registered to comply with the provisions o d I am familiar with and accep ng filed merely to reflect a cha been notified in writing of this	agent and agree of all statutes rel of the obligation of the regist of change.	to act in this capa ative to the proper of my position as i ered office addres	acity. r and comple registered a ss, I hereby c	ete perf gent. C confirm	formance Or if this that the
R:U		09-29	9-2021			
Sig	nature of Registered Agent		Date	c		
If signing on be	half of an entity:					
Bill Havre						
T	yped or Printed Name					
	***FIL	JNG 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)



September 10, 2021

VICTORIA PADRON ZENBUSINESS INC. 5511 PARKCREST DR STE 207 AUSTIN, TX 78731 US

SUBJECT: DOGTOR TECHNOLOGY INC.

Ref. Number: P21000068440

We have received your document for DOGTOR TECHNOLOGY INC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a LIMITED LIABILITY COMPANY, but your entity is a PROFIT CORPORATION. Please complete and return the enclosed blank form(s).

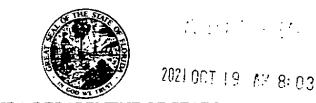
Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 121A00021890

Anissa Butler Regulatory Specialist II

www.sunbiz.org



FLORIDA DEPARTMENT OF STATE Division of Corporations

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