P21000095544

(Requestor's Name) (Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Dusiness Linky Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:





700378141377

12/17/21--01011--001 **35.00

2021 DEC 17 PH 3: 29

COVER LETTER

TO: Amendment Section Division of Corporations				
•				
SUBJECT: D.E.C.A. Investments, Inc. Name of Corporation				
DOCUMENT NUMBER: P21000095544				
The enclosed Statement of Change of Registered Office	ce/Agent and fee are submitted for filing.			
Please return all correspondence concerning this matter	er to the following:			
Michael J. Henry, Esq.				
Name of Contact Person	·			
Dunlap & Shipman, P.A.				
Firm/Company				
2063 S. County Hwy. 395				
Address				
Santa Rosa Beach, FL 32459				
City/State and Zip Code	······································			
michael@dunlapshipman.com				
E-mail address: (to be used for future annual report notification)				
·	•			
For further information concerning this matter, please	call:			
Michael J. Henry, Esq.	at (850 \\231-3315			
Name of Contact Person	at (850)231-3315 Area Code & Daytime Telephone Number			
Enclosed is a \$35.00 check made payable to the Depart				
Mailing Address:	Street Address:			
Amendment Section	Amendment Section			
Division of Corporations	Division of Corporations			
P.O. Box 6327	The Centre of Tallahassee			

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

CR2E045 (04/13)

Tallahassee, FL 32314

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

	hange is submitted for a corporation organized under the defense its registered office or registered agent, or b	, , , , , , , , , , , , , , , , , , , ,	
1. The name of	f the corporation: D.E.C.A. Investments, Inc.		
	al office address: 3320 Eagle Court, Chipley, FL 32428		
3. The mailing	address (if different): Same		
4. Date of incom	prporation/qualification: 5/16/2019 Documer	nt number: P21000095544	
	nd street address of the current registered agent and registe artment of State: (If resigned, enter resigned)		.
	Desiree Mejia	2;	20
	3320 Eagle Court	ZA E	
	Chipley, FL 32428		
6. The name an (if changed):	nd street address of the new registered agent (if changed) a	and /or registered office	<u> </u>
	Dunlap & Shipman, P.A.	· :	75 CD
	2063 S. County Hwy, 395		
	P.O. Box NOT acceptable Santa Rosa Beach, FL 32541		
The street address changed will	ress of its registered office and the street address of the b	ousiness office of its regis	tered agent,
	vas authorized by resolution duly adopted by its board of the board, or the corporation has been notified in writing		
bes	Declan Quinn,		
I hereby accept I further agree of my duties, ar document is be	t the appointment as registered agent and agree to act in to comply with the provisions of all statutes relative to and I am familiar with and accept the obligation of my point of the provisions of the obligation of the point of the registered offices a change in the registered offices been notified in writing of this change.	nted or typed name and title n this capacity. the proper and complete position as registered agent sition as registered agent see address, I hereby conf	performance ! Or if this irm that the
M	gnature of Registered Agent	12/10/2021	
	ehalf of an entity:	Date	
	y, Esq. on behalf of Dunlap & Shipm:		
	Typed or Printed Name		
	* * * FILING FEE: \$35.00 * * *	•	