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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081

Phone : (307)200-2803

Fax Number : (813)436-5206

\*\*Enter the email address for this business entity to be used for future " annual report mailings. Enter only one email address please.\*\*

Email	Address:						
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## REGISTERED AGENT CHANGE RAFFANELLO REALTY GROUP INC.

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$35.00

Hela

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

statement of che	ange is submitted for a corporation or	0502, 607,1508, or 617,1508, Florida Statute ganized under the laws of the State of <mark>Florida</mark> gistered agent, or both, in the State of Florida		_			
1. The name of	the corporation: Raffanello Realty Grou	up Inc					
				_			
3. The mailing a	address (if different):						
4. Date of incor	Document number: P22000067587						
5. The name and		ed agent and registered office on file with the					
	FT CORPORATE SERVICES, LLC						
		2021					
	Ţ.,	2024 JUL -2	4.1				
6. The name and (if changed):		agent (if changed) and /or registered office.					
	Registered Agents Inc		AM 10: 35	Œ			
	7901 4th St N STE 300	· i	. 3 <del>3</del>				
		Box NOT acceptable					
	St. Petersburg FL 33702	· · · · · · · · · · · · · · · · · · ·					
The street address changed will	ess of its registered office and the str be identical.	ect address of the business office of its regist	tered age	nt,			
Such change wa authorized by th	as authorized by resolution duly adopted to board, or the corporation has been	oted by its board of directors or by an officer notified in writing of the change.	SO				
nolan Rady	Panello- ic of an officer or director	Nolan Raffanello - President					
i juriner agree i of my duties, an	the appointment as registered agent to comply with the provisions of all s d I am familiar with and accept the a ng filed merely to reflect a change in s been notified in writing of this chan	and agree to act in this capacity, tatutes relative to the proper and complete p obligation of my position as registered agent the registered office address, I hereby confi ge.	performan Or, if the Irm that t	ice his he			
Doni Prote		07/02/2024					
Sign	nature of Registered Agent	Date		-			
If signing on be	half of an entity:						
David Roberts	<u></u>						
Гу	gped or Printed Name						