## P22000068137

(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:			

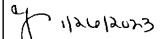
Office Use Only



000400518720

BJAN 25 AM 10:

RECEIVED
2023 JAN 25 PM 3-32
SECRETARY OF STATE



CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

.

ACCOUNT NO. :	I2000000195				
REFERENCE :	409990 4348220				
AUTHORIZATION :	mulle man				
COST LIMIT :	\$ 35.00				
ORDER DATE : January 25, 2023					
ORDER TIME : 2:31 PM					
ORDER NO. : 409990-010					
CUSTOMER NO: 4348220					
CHANGE OF AGENT					
NAME: DANIEL DOWELL, CPA, P.A.					
PLEASE RETURN THE FOLLOWING AS PRODUCTION OF THE POLLOWING AS	ROOF OF FILING:				
CONTACT PERSON: Eyliena Baker -	- EXT#				

EXAMINER:

## **COVER LETTER**

	Amendment Section Division of Corporations	
CUDIC	CT: Daniel Dowell, CPA, P.A.	
Name of	C1: Corporation	
DOCUM	MENT NUMBER: P22000068137	
The encl	losed Statement of Change of Registere	ed Office/Agent and fee are submitted for filing.
Please re	eturn all correspondence concerning thi	s matter to the following:
Steven B	_	
Name of	f Contact Person	
Vedder F		
Firm/Co	mpany	
1633 Bro	oadway, 31st Floor	
Address	<del>-</del>	
	rk, NY 10019	
City/Stat	te and Zip Code	<del></del>
	sberger@vedderprice.com	
E-mail a	address: (to be used for future annua	al report notification)
For furth	ner information concerning this matter,	please cail:
Steven B	Berger	21 / 212 \ \ 407-7714
	Name of Contact Person	at (212 ) 407-7714  Area Code & Daytime Telephone Number
Enclosed	d is a \$35.00 check made payable to the	e Department of State.
	Mailing Address: Amendment Section	Street Address:
	Amendment Section Division of Corporations	Amendment Section
	P.O. Box 6327	Division of Corporations The Centre of Tallahassee
	Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810
		Tallahassee, FL 32303

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

statement of cha	nge is submitted for a corporat	$^{0}$ , 617.0502, 607.1508, or 617.1508, Florida S ion organized under the laws of the State of $^{-1}$ or registered agent, or both, in the State of F	Florida	
	the corporation: Daniel Dowell,	•		
2. The principal	office address: c/o Marcum S C	Corp Legal, 10 Melville Park Road, Melville, I	NY 11747	
4. Date of incorporation/qualification: 9/1/2022 Document number: P22000068137				
	d street address of the current restment of State: (If resigned, ent	gistered agent and registered office on file wit er resigned)	th the	
	Daniel Dowell			
	3004 Euclid Avenue		2023 SE.C. TA	
	Tampa, FL 33629		2023 JAN 25 SECIRE DE ALLAHA	
6. The name and (if changed):	1 street address of the new regist	tered agent (if changed) and /or registered off	ice// History 😝	
	Corporation Service Compan	у		
	1201 Hays Street		m C	
	P.O. Box NOT acceptable			
	Tallahassee	FL 32301		
The street addre	ess of its registered office and t be identical.	the street address of the business office of its	registered agent,	
Such change wa authorized by th	as authorized by resolution dul- ne board, or the corporation has	y adopted by its board of directors or by an os been notified in writing of the change.	officer so	
	Paniel Dowell	Daniel Dowell	President	
Signa	COPERIONAL OF director	Printed or typed name and titl	e	
I further agree i of my duties, an document is bei corporation has	the appointment as registered to comply with the provisions of all am familiar with and acceping filed merely to reflect a chast been notified in writing of this Service Company	agent and agree to act in this capacity, of all statutes relative to the proper and com of the obligation of my position as registered inge in the registered office address, I hereb s change.	plete performance agent. Or, if this y confirm that the	
	Externs Calabi	01/25/2023		
Sign	nature of Registered Agent	Date	<del></del>	
If signing on be	half of an entity;			
	yned or Printed Name	_		

\* \* \* FILING FEE: \$35.00 \* \* \*

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE