

P23 000010441

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

Division of Corporations
Fax Number : (850)617-6380

From:

Account Name : DEAN, MEAD, EGERTON, BLOODWORTH, CAPOUANO & BOZARTH, P.A.
Account Number : 076077001702
Phone : (407)841-1200
Fax Number : (407)423-1831

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

Email Address: daniel@cvfamilycorp.com

**REGISTERED AGENT CHANGE
DEALER GENERAL WARRANTY, INC.**

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$35.00

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Corporate Filing Menu

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

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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: Dealer General Warranty, Inc.
2. The principal office address: 4070 S. Pipkin Road, Suite 1, Lakeland, FL 33811
3. The mailing address (if different): P.O. Box 470367, Celebration, FL 34747
4. Date of incorporation/qualification: 02/09/2023 Document number: P23000010441
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)

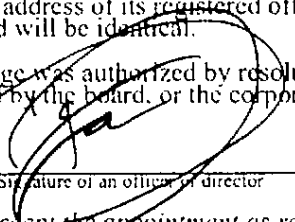
Dean Mead Services, LLC420 S. Orange Avenue, Suite 700Orlando, FL 32801

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

Florida Chief Financial OfficerFlorida Department of Financial ServicesP.O. Box NOT acceptable200 East Gaines Street, Tallahassee, FL 32399

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 directorDaniel J. Pearce, Secretary_____
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 AgentJuly 31, 2023_____
Date

If signing on behalf of an entity:

Florida Chief Financial Officer_____
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

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