

P24 000050162

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

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Account Name : ALLSTATE CORPORATE SERVICES CORP
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REGISTERED AGENT CHANGE
GZV24 CORP

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Corporate Filing Menu

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

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 FL _____ in order to change its registered office or registered agent, or both, in the State of Florida

1. The name of the corporation: GZYV24 CORP
2. The principal office address: _____
2135 LAKE AVENUE MIAMI BEACH FL 33140
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 07/30/2024 Document number: P24000050162
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)

OREN ALEXANDER

2135 LAKE AVENUE

MIAMI BEACH FL 33140

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

Registered Agent Solutions, Inc.

2894 Remington Green Ln. Ste. A

P.O. Box NOT acceptable

Tallahassee, FL 32308

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.

/s/ OREN ALEXANDER

OREN ALEXANDER, PRES

Signature of an officer or director

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.

/s/ NAOMI OSTOPOWITZ

08/01/2024

Signature of Registered Agent

Date

If signing on behalf of an entity:

NAOMI OSTOPOWITZ, ASSISTANT SECRETARY OF REGENT OF REGISTERED AGENT SOLUTIONS, INC.

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
CR21.045 (03-13)

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