P30421

(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:	
J. HORINE JUL 2 2025	

Office Use Only



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2025 JUL -1 161110: 51

025 JUL - 1 AHTT: 25

RECEIVED

CSC - Tallahassee
CSC 1201 Hays Street
Tallahassee, FL 32301-2607
850-558-1500, Ext: x62969

To: Department Of State, Division Of Corporations From: Amanda Miller - Amanda.Miller@cscglobal.com

Ext: x62969 Date: 07/01/25 Order #: 3783883-5

Re: MAISONS MARQUES & DOMAINES USA INC.

Processing Method: Routine

TO WHOM IT MAY CONCERN:

Enclosed please find:

Change of Registered Agent and Office

Check in the amount of: \$35.00 - FL State Account Number: I20000000195

Please take the following action:

File on a routine basis
Issue proof of filing
Return evidence to the following:
ATTN: Amanda Miller
c/o Corporation Service Company
251 Little Falls Drive
Wilmington, DE 19808

Special Instructions:

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

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

statement of cha	nge is submitted for a corporatio	617.0502, 607.1508, or 617.1508, Florida Stat on organized under the laws of the State of De or registered agent, or both, in the State of Flor	laware		
The name of t	he corporation: MAISONS MARC	QUES & DOMAINES USA INC.			
	office address: 383 4TH ST Suite				
3. The mailing a	ddress (if different):				
4. Date of incorp	poration/qualification: 07/09/199	Document number: P30427			
	I street address of the current regit tment of State: (If resigned, enter	istered agent and registered office on file with resigned)	the		
	NRAI Services, Inc.				
	1200 SOUTH PINE ISLAND R	OAD	1025 JUL -1		
	PLANTATION, FL 33324				
6. The name and (if changed):	I street address of the new registe	red agent (if changed) and /or registered office			
	Corporation Service Company	·	· OI		
	1201 Hays Street				
	Tallahassee	P.O. Box NOT acceptable FL 32301			
The street address changed will	ess of its registered office and the be identical.	e street address of the business office of its re	egistered agent.		
Such change wa authorized by th	as authorized by resolution duly ne board, or the corporation has	adopted by its board of directors or by an off been notified in writing of the change.	ficer so		
/S/ Adolfo Romero Signature of an officer or director		Adolfo Romero	CFO		
		Printed or typed name and title			
I further agrée i of my duties, an document is bei corporation has	the appointment as registered a to comply with the provisions of d I am familiar with and accept ng filed merely to reflect a chan been notified in writing of this a Service Company	went and agree to act in this capacity. Tall statutes relative to the proper and comple the obligation of my position as registered a use in the registered office address, I hereby a change.	ete performance gent. Or, if this confirm that the		
By: /S/ Grace E. Kirby		06/25/2025	<u> </u>		
ટ્રાંકા	nature of Registered Agent	Date			
If signing on be	half of an entity:				
	Asst Vice President	_			
T	yped or Printed Name				
	* * * F[1.]	ING FEE: \$35.00 * * *			

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (04/13)