

PA6000C9004\$

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

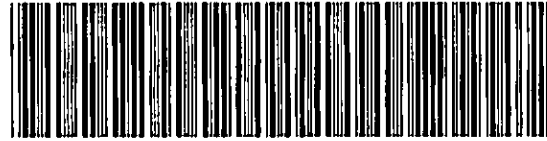
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11/12/20--01020--024 **25.00

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FILED
2021 JAN -4 PM 5:13
SECRETARY OF STATE
TALLAHASSEE, FL



FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 17, 2020

TONY DI MURO
5118 PINE TOP PLACE
ORLANDO, FL 32819

SUBJECT: B.D.D. REAL ESTATE CO.
Ref. Number: P96000090048

We have received your document and check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The form you submitted is for a LIMITED LIABILITY COMPANY, but your entity is a PROFIT CORPORATION. Please complete and return the enclosed blank form(s). All pages must be returned in order to file the document.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Querida R Moore
Regulatory Specialist II

Letter Number: 820A00025574

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: B.D.D. REAL ESTATE Co.
Name of Corporation

DOCUMENT NUMBER: P96000090048

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Tony DiMuro
Name of Contact Person

B.D.D. REAL ESTATE Co.
Firm/Company

5118 PINE TOP PL
Address

ORLANDO FL 32819
City/State and Zip Code

TonyDiMuro@AOL.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Tony DiMuro at (407) 876 0947
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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 FLORIDA in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: B. D. D. REAL ESTATE CO.
2. The principal office address: 5118 PINE TOP PL
ORLANDO, FL 32819
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 11/01/1996 Document number: P96000090048
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)

RICCARDO BRUGNOLI

2959 MARQUESAS COURT

WINDERMERE, FL 34786

RESIGNED

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

TONY DI MURO

5118 PINE TOP PLACE

P.O. Box NOT acceptable

ORLANDO, FL 32819

SECRETARY OF STATE
TALLAHASSEE, FL

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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.

Tony Di Muro
Signature of an officer or director

Tony Di Muro 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.

Tony Di Muro
Signature of Registered Agent

January 5 2021
Date

If signing on behalf of an entity:

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
CR2E045 (04/13)