2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N15000008921

Entity Name: CLOUDBASE THERAPY, INC.

Current Principal Place of Business:

30203 SWINFORD LN WESLEY CHAPEL. FL 33543

Current Mailing Address:

30203 SWINFORD LN

WESLEY CHAPEL, FL 33543 US

FEI Number: 47-5261187 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GRANZOTI, RENATO 30203 SWINFORD LN WESLEY CHAPEL, FL 33543 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: RENATO GRANZOTI 09/16/2019

Electronic Signature of Registered Agent

Date

FILED Sep 16, 2019

Secretary of State

7134261147CC

Officer/Director Detail:

Title PRESIDENT Title \

NameGRANZOTI, RENATONameGIVENS, BERKLEYAddress30203 SWINFORD LNAddress30203 SWINFORD LN

City-State-Zip: WESLEY CHAPEL FL 33543 City-State-Zip: WESLEY CHAPEL FL 33543

Title S Title T

Name GRANZOTI, OXANA Name GRANZOTI, RENATO
Address 30203 SWINFORD LN Address 30203 SWINFORD LN

City-State-Zip: WESLEY CHAPEL FL 33543 City-State-Zip: WESLEY CHAPEL FL 33543

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: RENATO GRANZOTI

Electronic Signature of Signing Officer/Director Detail

PRESIDENT

09/16/2019 Date