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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

Ρ

SIGNATURE: MANUEL CID

Electronic Signature of Signing Officer/Director Detail

DOCUMENT# P06000047164

Entity Name: MANUEL A. CID & ASSOCIATES, INC

Current Principal Place of Business:

14448 S.W. 173RD STREET MIAMI, FL 33177

Current Mailing Address:

14448 S.W. 173RD STREET MIAMI, FL 33177 US

FEI Number: 20-4619587

Name and Address of Current Registered Agent:

TAXPLUS AND ACCOUNTING INC 4445 W 16 AVE 406 HIALEAH, FL 33012 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:

Electronic Signature of Registered Agent

Officer/Director Detail :

Title	Р	Title	CFO
Name	CID, MANUEL A	Name	RAMAS, MARIA C
Address	14448 S.W. 173RD STREET	Address	14448 S.W. 173 STREET
City-State-Zip:	MIAMI FL 33177	City-State-Zip:	MIAMI FL 33177

FILED Feb 09, 2024 Secretary of State 8244356077CC

Certificate of Status Desired: No

02/09/2024 Date

Date