

	1
(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:	]
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FILED

## **COVER LETTER**

SUBJECT: Project Read Together Inc.

Name of Corporation

DOCUMENT NUMBER: N15000005097

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:

Anna Vigliotti

Name of Contact Person

Project Read Together Inc.

Firm/Company

8410 Idlewood Ct

Address

Lakewood Ranch, FL 34202

City/State and Zip Code

anna@projectreadtogether.org

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Anna Vigliotti
Name of Contact Person

at (941 ) 284-6768
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
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

TO:

Amendment Section Division of Corporations

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

statement of cha	provisions of sections 607.0502, 617 inge is submitted for a corporation of r to change its registered office or re	rganized under the laws of the S	tate of Florida
<ol> <li>The name of t</li> <li>The principal</li> </ol>	the corporation: Project Read 1 office address: 8410 Idlewood d Ranch, FL 34202	ogether Inc.	
	ddress (if different):		
4. Date of incorp	poration/qualification: 05/19/201	5 Document number:	N15000005097
	I street address of the current register tment of State: (If resigned, enter res	~	n file with the
	Alfonso Vigliotti		
	13885 SIENA LOOP		<b>201</b>
	Lakewood Ranch, FL 342	202	2018 SEP
6. The name and (if changed):	street address of the new registered	agent (if changed) and /or regist	tered of the control
	Anna Vigliotti		M 9: LO F STATE
	8410 Idlewood Ct		, Eo
	Lakewood Ranch, FL 342	NOT acceptable 202	
The street address changed will	ess of its registered office and the str be identical.	reet address of the business offi	ice of its registered agent,
	as authorized by resolution duly ado ne board, or the corporation has been		
Signatu	re of an officer or director	Anna Vigliotti Printed or typed na	me and title
I further agree i performance of agent. Or, if the	the appointment as registered agen to comply with the provisions of all my duties, and I am familiar with a is document is being filed merely to that the corporation has been notifi	statutes relative to the proper a nd accept the obligation of my j reflect a change in the register	ind complete position as registered
1 mno	Viola Di	8/30/18	
	nature of Registered Agent	Date	
If signing on be	half of an entity:		
Hnna I	/i q / 10 ##		

\* \* \* FILING FEE: \$35.00 \* \* \*