

P13000095020

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

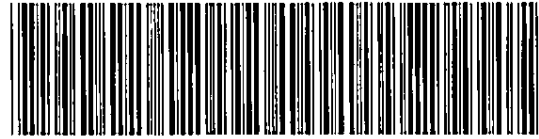
(Business Entity Name)

(Document Number)

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2020 MAY -4 PM 5:04

STATE OF MICHIGAN
DEPARTMENT OF TREASURY
REGISTRATION DIVISION

05/04/20--01014--023 **35.00

Call
5/21/20

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Luanne Kelly Interiors, Inc
Name of Corporation

DOCUMENT NUMBER: P13000095020

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:

Luanne Kelly
Name of Contact Person

Luanne Kelly Interiors
Firm/Company

58 Turtle Court
Address

Santa Rosa Beach, FL 32459
City/State and Zip Code

luannekellyinteriors@hotmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Luanne Kelly at (850) 520 0128
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: Luanne Kelly Interiors, Inc

2. The principal office address: 58 Turtle Court
Santa Rosa Beach, FL 32459

3. The mailing address (if different): _____

4. Date of incorporation/qualification: 11/22/13 Document number: P13000095020

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)

Brad Congleton CPA, Inc
2050 W. Highway 30A Ste 214
Santa Rosa Beach, FL 32459

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

Nancy Luanne Kelly
58 Turtle Court
Santa Rosa Beach, FL 32459

P.O. Box NOT acceptable

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DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

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.

N. Luanne Kelly
Signature of an officer or director

N. Luanne Kelly
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.

N. Luanne Kelly
Signature of Registered Agent

4/30/20
Date

If signing on behalf of an entity:

N. Luanne Kelly
Typed or Printed Name

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