SPRING TILL, TE 54000 05				
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	E KLORAN LINDA			02/01/2023
	Electronic Signature of Registered Agent			Date
Officer/Director Detail :				
Title	PD	Title	VPD	
Name	KLORAN, LINDA	Name	WALKER, KATHY	
Address	10378 MADERIA ST	Address	10378 MADERIA ST	
City-State-Zip:	SPRING HILL FL 34608	City-State-Zip:	SPRING HILL FL 34608	
Title	STD			
Name	KLORAN, LINDA C			
Address	10378 MADERIA ST			

### **10378 MADERIA STREET** SPRING HILL, FL 34608 US

**Current Mailing Address:** 

DOCUMENT# N06000012653

**10378 MADERIA STREET** SPRING HILL, FL 34604

# FEI Number: 22-3949330

### Name and Address of Current Registered Agent:

Entity Name: TROPICAL FELINE RESCUE, INC.

**Current Principal Place of Business:** 

LINDA, KLORAN 10378 MADERIA STREET SPRING HILL, FL 34608 US

#### 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. 02/01/2023

## SIGNATURE: LINDA C KLORAN

City-State-Zip: SPRING HILL FL 34608

Electronic Signature of Signing Officer/Director Detail

## Certificate of Status Desired: No

Date

## FILED Feb 01, 2023 Secretary of State 6557483416CC

PRESIDENT