

711286

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

(Business Entity Name)

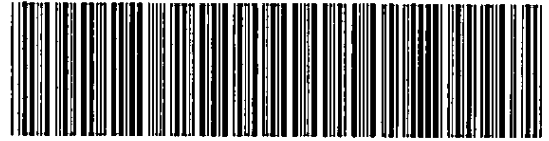
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OCT 29 2021

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Arcadia Garden Club, Incorporated
Name of Corporation

DOCUMENT NUMBER: 711286

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:

Pat Moore

Name of Contact Person

Arcadia Garden Club, Incorporated

Firm/Company

PO Box 24

Address

Arcadia, FL 34266-0024

City/State and Zip Code

pethreads@gmail.com

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

For further information concerning this matter, please call:

Patricia A. Moore

at (941) 740-5817

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: The Arcadia Garden Club, Incorporated
2. The principal office address: 1005 W. Magnolia, Arcadia, FL 34266
3. The mailing address (if different): PO Box 24, Arcadia, FL 34266-0024
4. Date of incorporation/qualification: 08/02/1966 Document number: 711266
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)

Barbara D. Ames

3847 SE Brown Rd.

Arcadia, FL 34266

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

Patricia A. Moore

821 W. Imogene

P.O. Box NOT acceptable

Arcadia, FL 34266


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.


Signature of an officer or director

Marcie Alcock Vice President
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.


Signature of Registered Agent

09/22/2021

Date

If signing on behalf of an entity:

Patricia A. Moore

Typed or Printed Name

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (04/13)