

712417

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

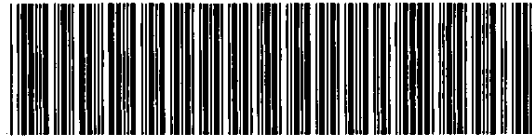
(Business Entity Name)

(Document Number)

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DIVISION OF CORPORATIONS
17 MAY 30 PM 4:16

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JUN - 7 2017

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: SEMINOLE LODGE 971 HOLDING CORP.
Name of Corporation

DOCUMENT NUMBER: 712417

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:

MICHAEL JAMES PORTER
Name of Contact Person

SEMINOLE LODGE 971
Firm/Company

2524 SE APPLEBY ST.
Address

PORT SAINT LUCIE, FL 34984
City/State and Zip Code

michaelporter08@comcast.net
E-mail address: (to be used for future annual report notification)

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DIVISION OF CORPORATIONS
17 MAY 30 PM 4:16

For further information concerning this matter, please call:

MICHAEL PORTER at (772) 342-7366
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
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 16, 2017

MICHAEL JAMES PORTER
SEMINOLE LODGE 971
2524 SE APPLEBY ST
PORT SAINT LUCIE, FL 34984

SUBJECT: SEMINOLE LODGE 971 HOLDING CORPORATION
Ref. Number: 712417

We have received your document for SEMINOLE LODGE 971 HOLDING CORPORATION and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Diane Cushing
Senior Section Administrator

Letter Number: 517A00009762

RECEIVED
17 MAY 30 AM 8:12
FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

**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: SEMINOLE LODGE 971 HOLDING CORP.
2. The principal office address: 2581 JUPITER PARK DR, E-22
JUPITER, FL 33458
3. The mailing address (if different): 2524 SE APPLEBY ST.
PORT SAINT LUCIE, FL 34984
4. Date of incorporation/qualification: 3/16/1967 Document number: 712417
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)

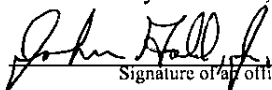
MICHAEL JAMES PORTER
2252 N.W. 46TH AVE.
OKEECHOBEE, FL 34972

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

MICHAEL JAMES PORTER
2524 SE APPLEBY ST.
P.O. Box NOT acceptable
PORT SAINT LUCIE, FL 34984

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

JOHN GALL, JR 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

5-23-17
Date

If signing on behalf of an entity:

Michael J. Porter
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 (03/12)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
17 MAY 30 PM 4:16