## 726663

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone #	<del>j</del>
<u></u>	☐ WAIT	MAIL
(Bu	siness Entity Name	e)
(Do	cument Number)	
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05/12/14--01011--018 \*\*35.00

RACH 05-22-14 DC

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

Pursuant to the provisions of sections 607.050. statement of change is submitted for a corpora in order to change its registered office.	tion organized under the laws of the S	State of Florida
1. The name of the corporation: Pelican Poir	-	
2. The principal office address: 300 Park Sho		
Naples, FL	24102	
3. The mailing address (if different):		
4. Date of incorporation/qualification:06/	12/1973 Document number:	726663
5. The name and street address of the current re Florida Department of State: (If resigned, en		on file with the
Katzman G	arfinkel & Berger	<u></u>
5297 West	Copands Road	يمين مارين مارين
	L 33063	
6. The name and street address of the new regist (if changed):	stered agent (if changed) and /or regis	stered office
Becker & Po	liakoff, P.A.	
1 East Broward Blvd., Suite 1800		<u>ு</u> வ
P	O. Box NOT acceptable	
Fort Lauderd	lale, FL 33301	<u></u>
The street address of its registered office and as changed will be identical.	the street address of the business off	fice of its registered agent,
Such change was authorized by resolution du authorized by the board, or the corporation has		
Co daie be Signature of an orner director	Candau Cree	gory Bourd President
I hereby accept the appointment as registered further agree to comply with the provisions performance of my duties, and I am familiar agent. Or, if this document is being filed mer hereby confirm that the corporation has been	of all statutes relative to the proper	and complete
Signature Degistered Agent	Date	15/14
If signing on behalf of an entity:	July	
Typed or Printed Name		

Make checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

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