

761105

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

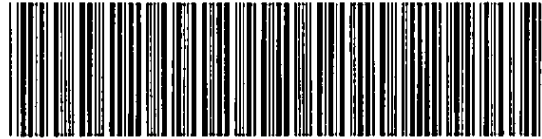
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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SECRETARY OF STATE  
TALLAHASSEE, FL

1/24/2023

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Prison Rehabilitative Industries and Diversified Enterprises, Inc.  
Name of Corporation

**DOCUMENT NUMBER:** 761105

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:

Denise Kiminki

Name of Contact Person

PRIDE Enterprises

Firm/Company

1463 Oakfield Drive #126

Address

Brandon, FL 33511

City/State and Zip Code

info@pride-enterprises.org

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

For further information concerning this matter, please call:

Denise Kiminki

Name of Contact Person

at ( 727 )

639-5875

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: Prison Rehabilitative Industries and Diversified Enterprises, Inc.
2. The principal office address: 1463 Oakfield Drive #126 Brandon, FL 33511
3. The mailing address (if different): P.O.Box 4480 Brandon, FL 33509
4. Date of incorporation/qualification: 12/14/1981 Document number: 761105
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)

215 S. Monroe Street

Suite 825

Tallahassee, FL 32301

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

2807 Remington Green Circle

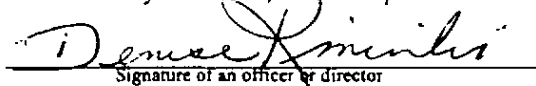
Suite 215

P.O. Box NOT acceptable

Tallahassee, FL 32308

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

Denise Kiminki, CAO

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

10/20/2022

Date

If signing on behalf of an entity:

Wilbur Brewton

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)

SECRET  
TALLAHASSEE, FL

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