

768069

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

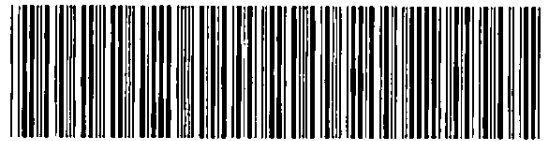
(Business Entity Name)

(Document Number)

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

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Office Use Only



900434915979

RA change

05/20/24--01019--017 \*\*35.00

2024 AUG 20 PM 12:00  
CLERK OF STATE  
A. RAMSEY, Filing Officer

FILED

A. RAMSEY

AUG 30, 2024

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Frostproof Area Chamber of Commerce, Inc.  
Name of Corporation

**DOCUMENT NUMBER:** 768069

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:

Emily Bennett

Name of Contact Person

Frostproof Area Chamber of Commerce, Inc.

Firm/Company

33 East Wall Street

Address

Frostproof, FL 33843

City/State and Zip Code

info@frostproofchamberofcommerce.com

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

For further information concerning this matter, please call:

Emily Bennett

Name of Contact Person

at (863) 635-9112

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: Frostproof Area Chamber of Commerce, Inc.
2. The principal office address: 33 East Wall Street  
Frostproof, FL 33843
3. The mailing address (if different): \_\_\_\_\_
4. Date of incorporation/qualification: 01/19/2024 Document number: 768069
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)

Resigned

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

Emily Bennett

33 East Wall Street

P.O. Box NOT acceptable

Frostproof, FL 33843

FILED  
2024 AUG 20 PM 12:00  
CLERK OF STATE  
TALLAHASSEE, FL 32310

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.

Emily Bennett  
Signature of an officer or director

Emily Bennett, Executive Director

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.

Emily Bennett  
Signature of Registered Agent

08/14/2024

Date

If signing on behalf of an entity:

Emily Bennett

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)