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To:

Division of Corporations

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: (850)617-6380

From:

Account Name

: C T CORPORATION SYSTEM

Account Number : FCA000000023

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: (850)205-8842 : (850)878-5368

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REGISTERED AGENT CHANGE PALLET DIRECT INC.

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COVER LETTER

TO: Amendment Section Division of Corporations	•
PALLET DIRECT, INC.	
Name of Corporation	
DOCUMENT NUMBER:	
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for fi	ling.
Please return all correspondence concerning this matter to the following:	
Lydia Ann Stillwell Name of Contact Person	
Name of Contact Person	
Pailet Direct Inc.	
Firm/Company	
5660 Cypress Hollow Way Address	
· · · · · · · · · · · · · · · · · · ·	
Noples FL 34107 City/State and Zip Code	
City/State and Zip Code	
ann still well apollet direct. com	
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
Ann Stilluse 1 at (3/2 480 172) Name of Contact Person Area Code & Daytime Teler	7
Name of Contact Person Area Code & Daytime Tele	bone Number
Enclosed is a \$35.00 check made payable to the Department of State.	
Mailing Address: Street Address: Amendment Section Amendment Section	
Division of Corporations Division of Corporation	ons
P.O. Box 6327 Clifton Building	.
Tallahassee, FL 32314 2661 Executive Cente Tallahassee, FL 32301	

CR2E045 (03/12)

CR2E045 (03/12)

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

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this unge is submitted for a corporation organized under the laws of the State of 11441015 or to change its registered office or registered agent, or both, in the State of Florida.	
1. The name of t	the corporation: PALLET DIRECT INC.	
2. The principal NAPLES, FL	office address: 5660 Cypress Hollow Way	
3. The mailing a	address (if different):	
4. Date of incom	poration/qualification: 04/08/2010 Document number; F10000001710	
	d street address of the current registered agent and registered office on file with the rtment of State: (If resigned, enter resigned)	
	STILLWELL, LYDIA A	
	5660 Cypress Hollow Way	إند
	NAPLES, FL 34109	7
6. The name and (if changed):		
	c/o C T Corporation System, 1200 South Pine Island Road	K Y
	P.O. Box NOT acceptable	٢
	Plantation, Florida 33324	
as changed will	ress of its registered office and the street address of the business office of its registered agent, if be identical. vas authorized by resolution duly adopted by its board of directors or by an officer so the board, or the corporation has been notified in writing of the change.	
Ly die /	Ann Stillwell Lydia Ann Stillwell bore of an allower or deretter Printed or typed manage land talle	
I hereby accep I further agree performance o agent. Or, if the hereby confirm	nt the appointment as registered agent and agree to act in this capacity, to comply with the provisions of all statutes relative to the proper and complete of my duities, and I am familiar with and accept the obligation of my position as registered his document is being filed merely to reflect a change in the registered office address, I in that the corporation has been notified in writing of this change.	
By: CTCo	Jener Wind 6-19-2015	
	behalf of an entity:	
	r Vincent	
	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	