F19000002815

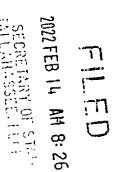
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
J. HORNE
FEB 2 4 2022

Office Use Only



900381017489

02/14/22--01025--002 **35.00



COVER LETTER

Amendment Section

TO:

Division of Corporations SUBJECT: Pink Flamingo GP Inc. Name of Corporation DOCUMENT NUMBER: F19000002815 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: Steve Hartsell Name of Contact Person PLF Registered Agent, L.L.C. Firm/Company 1833 Hendry Street Address Fort Myers, FL 33901 City/State and Zip Code registeredagent@paveselaw.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Steve Hartsell 336-6244 Area Code & Daytime Telephone Number Name of Contact Person

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

CR2E045 (04/13)

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 ange is submitted for a corporation organized under the laws of the State of Florida er to change its registered office or registered agent, or both, in the State of Florida.	
	the corporation: Pink Flamingo GP Inc.	
2. The principal	Toffice address: 3410 South Service Road, STE. 201 Burlington, Ontario (Canada) L7N	3T2
3. The mailing a	address (if different):	
4. Date of incorp	poration/qualification: 04/25/2019 Document number: F19000002815	
	d street address of the current registered agent and registered office on file with the artment of State: (If resigned, enter resigned)	
	Paulich, John, III	
	3838 Tamiami Trail North, STE 410	
	Naples, FL 34103	
6. The name and (if changed):	Naples, FL 34103 d street address of the new registered agent (if changed) and /or registered office PER Provinte and Agent LL C	
	PLF Registered Agent, L.L.C.	i !""
	1833 Hendry Street	
	P.O. Box NOT acceptable	
	Fort Myers, FL 33901	
The street addro as changed will	ress of its registered office and the street address of the business office of its registered agent. I be identical.	
Such change wa authorized by th	ras 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.	
\$	Carmen Campagnaro, President ure of an officer or director Printed or typed name and title	
I hereby accept I further agree to of my duties, and document is bei	t 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 performance and I am familiar with and accept the obligation of my position as registered agent. Or, if this ring filed merely to reflect a change in the registered office address, I hereby confirm that the is been notified in writing of this change.	
- Vary	grature of Registered Agent Date	
If signing on be	ehalf of an entity:	
	Istered Agent, L.L.C. Typed or Printed Name	

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