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COVER LETTER

TO: Amendment Section Division of Corporations

_{subject:} Pelicans III Inc

Name of Corporation

DOCUMENT NUMBER: F98000000348

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:

Mary Woodford

Name of Contact Person

Pelicans III Inc

Firm/Company

49 Wild Cat Lane

Address

Ormond Beach FL 32174

City/State and Zip Code

marywoodfordmk@gmail.com

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

For further information concerning this matter, please call:

Mary Woodford

,386

453-3577

Name of Contact Person

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
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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 Stati ange is submitted for a corporation organized under the laws of the State of <mark>Virgi</mark> er to change its registered office or registered agent, or both, in the State of Flori	inia
	the corporation: Pelicans III Inc	au.
 The name of the control 	I office address: 49 Wild Cat Lane Ormond Beach FL 32174	
3. The mailing a	address (if different):	
4. Date of incorp	rporation/qualification: Jan 20, 1998 Document number: F980000	00348
	nd street address of the current registered agent and registered office on file with thartment of State: (If resigned, enter resigned)	he
	Samuel M. Kroll, Williams Mullen	
	222 Central Park Avenue Suite 1700	a :
	Virginia Beach VA 23462	16 JAN 14
6. The name and (if changed):	nd street address of the new registered agent (if changed) and /or registered office	
	Mary H Woodford	PH 1:55
	49 Wild Cat Lane	ก็เอร ู 55
	P.O. Box NOT acceptable Ormond Beach FL 32174	•
The street address changed will	ress of its registered office and the street address of the business office of its reg l be identical.	gistered agent,
	as authorized by resolution duly adopted by its board of directors or by an office the board, or the corporation has been notified in writing of the change.	er so
	Mary H. Woodford, Preside Printed or typed name and title	nt
I hereby accept I further agree of performance of agent. Or, if the hereby confirm	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 complet f my duties, and I am familiar with and accept the obligation of my position as his document is being filed merely to reflect a change in the registered office ac t that the corporation has been notified in writing of this change.	e registered ldress, I
	JHWOOD ON 01/11/16 gnature of Registered Agent Date	<u>,</u>
If signing on be	ehalf of an entity:	
MARY	1 H. WOODFORD	
[,	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 * * *