	Address 800002952548
City/St	rate/Zip Phone #
CORPORATIO	Office Use Only ON NAME(S) & DOCUMENT NUMBER(S), (if known):
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☐ Walk in	orporation Name) (Document #) Pick up time
Walk in Mail out	
Walk in Mail out NEW FILINGS Profit	Pick up time Certified Copy Will wait Photocopy Certificate of Statis
Walk in Mail out NEW FILINGS Profit NonProfit	Pick up time Certified Copy Will wait Photocopy Certificate of Status AMENDMENTS Amendment Resignation of R.A., Officer/ Director
Walk in Mail out NEW FILINGS Profit NonProfit Limited Liability	Pick up time Certified Copy Will wait Photocopy Certificate of Status AMENDMENTS Amendment Resignation of R.A., Officer/ Director Change of Registered Agent
Walk in Mail out NEW FILINGS Profit NonProfit Limited Liability Domestication	Pick up time Certified Copy Will wait Photocopy Certificate of Status AMENDMENTS Amendment Resignation of R.A., Officer/ Director Change of Registered Agent Dissolution/Withdrawal
Walk in Mail out NEW FILINGS Profit NonProfit Limited Liability	Pick up time Certified Copy SS 22 3 3 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4
Walk in Mail out NEW FILINGS Profit NonProfit Limited Liability Domestication Other OTHER FILINGS	Pick up time Certified Copy SS 22 3 3 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4
Walk in Mail out NEW FILINGS Profit NonProfit Limited Liability Domestication Other OTHER FILINGS Annual Report	Pick up time Certified Copy SS 22 3 3 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4
Walk in Mail out NEW FILINGS Profit NonProfit Limited Liability Domestication Other OTHER FILINGS Annual Report Fictitious Name	Pick up time Certified Copy SS 22 3 3 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4
Walk in Mail out NEW FILINGS Profit NonProfit Limited Liability Domestication Other OTHER FILINGS Annual Report	Pick up time Certified Copy SS 22 3 3 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4
Walk in Mail out NEW FILINGS Profit NonProfit Limited Liability Domestication Other OTHER FILINGS Annual Report Fictitious Name	Pick up time Certified Copy Will wait Photocopy Certificate of Status AMENDMENTS Amendment Resignation of R.A., Officer/Director Change of Registered Agent Dissolution/Withdrawal Merger REGISTRATION/ QUALIFICATION Foreign Limited Partnership

Examiner's Initials



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

June 7, 1999

Sonia O'Donnell 849 Eifel Terrace Port Charlotte, FL 33952

SUBJECT: THE WORLD PARROT TRUST USA, INC.

Ref. Number: F99000001131

Pursuant to your letter of June 1, to be removed as registered agent the enclosed statement of change form can be completed and returned along with the required filing fee of \$35. Or, you can resign as agent by completing the resignation form enclosed and paying a filing fee of \$87.50. It is not the responsibility of the Division of Corporations to contact the new registered agent.

If you have any questions concerning this matter, please either respond in writing or call (850) 487-6901.

Susan Payne Senior Section Administrator

Letter Number: 199A00030590



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

August 13, 1999

WORLD PARROT TRUST P.O. BOX 50733 ST. PAUL, MN 55150

SUBJECT: THE WORLD PARROT TRUST USA, INC.

Ref. Number: F99000001131

We have received your document for THE WORLD PARROT TRUST USA, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The designation of the registered office and the registered agent, both at the same Florida street address, must be contained within the document pursuant to Florida Statutes. The registered agent must sign accepting the designation as required by Florida Statutes.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6916.

Carol Mustain Corporate Specialist

Letter Number: 599A00040980

AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, the
undersigned corporation organized under the laws of the State ofFLORIDA
submits the following statement in order to change its registered office or registered agent, or both, in the
1. The name of the corporation is: WOELD PARROT TRUST USA MC
2. The mailing address of the corporation is: POBOX 50733, St. Paul,
3. Date of incorporation/qualification: November 94 Document number: F9900001131
4. The name and address of the current registered agent and office:
Sonia O'Donnell
_ 849 Eifel Terrace
Provi Chairlille
5. The name and address of the new registered agent and office: (P. O. Box Not Acceptable)
Steve Martin
9011 T.
9014 Thompson Nursern Rd Es &
Lake Wales, FL 33852
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 at the street address of the business office of its registered.
Such change was authorized by resolutionably adopted by its to the surface of the
Such change was authorized by resolution duly adopted by its board of directors or by an officer so
(Signature of an officer, chairman or vice chairman of the board) (Date)
* Steve Martin Director, World Parrot Trust (Printed or typed name and title)
Having been named as registered agent and to accept service of process for the above stated corporation, 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
× // M
(Signature of Registered Agent) 16 oct 1999
If signing on behalf of an entity:
(Typed or Printed Name) (Capacity)
* * * FILING FEE: \$35.00 * * *
CR2E045(7/97)
DIVISION OF CORPORATIONS P.O. BOX 6327 Tall AVEC 2001 FT. 2001

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TALLAHASSEE, FL 32314