K82376

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SECRETANY OF STATE

COVER LETTER

Name of Corporation

DOCUMENT NUMBER: K82376

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:

Kayla Ziegler

Name of Contact Person

821 NW Red Pine Way

Ziegler Enterprises, Inc.

Address

Jensen Beach, Fl 34957

City/State and Zip Code

Z.Kayla@Yahoo.com

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

For further information concerning this matter, please call:

Kayla Ziegler at (772) 486-7121

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

TO:

Amendment Section Division of Corporations

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

statement of cha	e provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this cange is submitted for a corporation organized under the laws of the State of Florida for to change its registered office or registered agent, or both, in the State of Florida.	
1. The name of the corporation: Ziegler Enterprises, Inc. 2. The principal office address: 1724 NE Silvia Ave. Jensen Beach, Fl 34957		
3. The mailing a	address (if different):	
4. Date of incor	poration/qualification: 1995 Document number: K82376	
	d street address of the current registered agent and registered office on file with the urtment of State: (If resigned, enter resigned)	
	Kim Ziegler	
	NE Silvia Ave.	
	Jensen Beach, Fl. 34957	
6. The name and (if changed):	d street address of the new registered agent (if changed) and /or registered office.	
	Kayla Ziegler	
	821 NW Red Pine Way.	
	Jensen Beach, Fl 34957	
The street address changed will	ess 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	as authorized by resolution duly adopted by its board of directors or by an officer so he board, or the corporation has been notified in writing of the change.	
Signatu	ure of an officer of timetor PRES	
I further agree to performance of agent. Or, if the	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 f my duties, 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 that the corporation has been notified in writing of this change. 1	
Laya	June 24, 2019	
If signing on be	chalf of an entity:	
	yped or Printed Name	

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (03/12)

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