

NO1000001215

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
15 AUG 31 AM 8:13

SEP 2 2015
C LEWIS

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Island Village Montessori Charter School, Inc.
Name of Corporation

DOCUMENT NUMBER: N01000001215

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:

Aimee Heden
Name of Contact Person
Island Village Montessori Charter School, Inc.
Firm/Company
2001 Pinebrook Road
Address
Venice, FL 34292
City/State and Zip Code
aimeeheden@islandvillage.org
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Aimee Heden at (941) 484-4999 Ext 222
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**

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Island Village Montessori Charter School, Inc.

2. The principal office address: 2001 Pinebrook Road, Venice FL 34292

3. The mailing address (if different): _____

4. Date of incorporation/qualification: 02/19/2001 Document number: N01000001215

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

Elder, Kimberly P

599 Old Albee Farm Rd

Nokomis, FL 34275 US

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Kimberly P. Elder

2001 Pinebrook Rd.

P.O. Box NOT acceptable

Venice, FL 34292

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 duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

Patricia C. Meringer
Signature of an officer or director

Patricia C. Meringer
Printed or typed name and title

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 registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

Kimberly P. Elder
Signature of Registered Agent

Date

If signing on behalf of an entity:

Kimberly P. Elder
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

CR2E045 (03/12)

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