## N01000006413

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(Business Entity Name)
(Document Number)
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## **COVER LETTER**

TO:

Amendment Section Division of Corporations

SUBJECT: Springhouse Quilter Name of Corporation	's Guild	
Name of Corporation		
DOCUMENT NUMBER: NO 10000 6413		
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:		
Donna Hayes Name of Contact Person		
Springhouse Quilter's Guild Firm/Company		
P.O. Box 305 Address		
Trenton, F1 32693 City/State and Zip Code		
Trenton, F1 32693 City/State and Zip Code  Connahayes a hs@gmail.com  E-mail address: (to be used for future annual report notification)		
For further information concerning this matter, please call:		
Name of Contact Person	at (352 ) 226-0141 Area Code & Daytime Telephone Number	
Enclosed is a \$35.00 check made payable to the Department of State.		
Amendment Section Division of Corporations P.O. Box 6327	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

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: Springhouse Quilter's Guild
1. The name of the corporation: Springhouse Quilter's Guild  2. The principal office address: 8680 SW 55th Aue Trenton, F1 32693
3. The mailing address (if different): POBOX 305, Trenton, Fl. 32693
4. Date of incorporation/qualification: Document number:
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)
LOIS Scott
POBOX 10/19/ 9569 SW 15th Court
Trenton, F1 32693
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):  Donna Hayes  798 SE 97th St
798 SE 97th St.  P.O. Box NOT acceptable
P.O. Box NOT acceptable  Tranton F1 32692
Trenton, F1 32693
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.
KAthryd M. Beaulieu KAthryd M. Beaulieu
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.
Norman Hours 1-12-2023 Signature of Registered Agent Date
If signing on behalf of an entity:
Donna Hayes 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