

N02 000000 3193

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

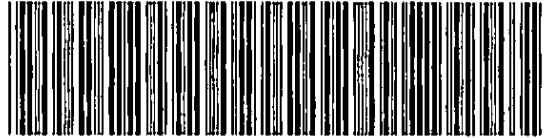
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

J. HORNE  
APR - 4 2022

Office Use Only



900383280939

03/21/22--01091--004 \*\*35.00

FILED  
2022 MAR 21 AM 11:03  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Bobby Nichols-Fiddlesticks Foundation, Inc.  
Name of Corporation

**DOCUMENT NUMBER:** N02000003193

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:

Michael Lancellot

Name of Contact Person

Bobby Nichols-Fiddlesticks Foundation, Inc.

Firm/Company

15391 Canongate Drive

Address

Fort Myers, FL 33912

City/State and Zip Code

mike@nicholscup.org

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

For further information concerning this matter, please call:

Michael Lancellot

at

(239)

940-7580

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  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

**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: Bobby Nichols-Fiddlesticks Foundation, Inc.
2. The principal office address: 15391 Canongate Drive, Fort Myers, FL 33912
3. The mailing address (if different): \_\_\_\_\_
4. Date of incorporation/qualification: 04/26/2002 Document number: N02000003193
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)

CLASP, INC

3001 Tamiami Trail North, Suite 400

Naples, FL 34103

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

Aloia, Roland, Lubell & Morgan, PLLC

2222 Second Street

P.O. Box NOT acceptable

Fort Myers, FL 33901

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.

Signature of an officer or director

Michael Lancelot, President

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.*

Signature of Registered Agent

3/15/22

Date

If signing on behalf of an entity:

\_\_\_\_\_  
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 (04/13)

FILED  
2022 MAR 21 AM 11:03  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA