

1030000067558

(Requestor's Name)

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(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
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OCT 17 2016
T. LEMMED

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Sonshine Learning Center, Inc.
Name of Corporation

DOCUMENT NUMBER: NO3000007558

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:

Amber Watson
Name of Contact Person

Sonshine Learning Center, Inc.
Firm/Company

351 Orange Road
Address

Venice, FL 34293
City/State and Zip Code

slc.kids2008@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Amber Watson at (941) 493-9938
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: Sonsine Learning Center, Inc.
2. The principal office address: 351 Orange Rd.
Venice, FL 34293
3. The mailing address (if different): _____

4. Date of incorporation/qualification: 10-5-16 Document number: NO3000007558

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)

Resigned

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

Sandra M. Richardson
351 Orange Road
P.O. Box NOT acceptable
Venice, FL 34293

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TALLAHASSEE, FL
SECRETARY OF STATE

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.

Linda Niedermeyer
Signature of an officer or director

Linda Niedermeyer Secretary
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.

Sandra M. Richardson
Signature of Registered Agent

10-9-16

Date

If signing on behalf of an entity:

Typed or Printed Name

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