

108000003182

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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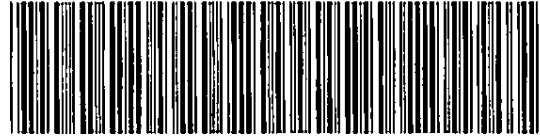
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: SWFL Children's Charities, Inc.

Name of Corporation

DOCUMENT NUMBER: NO8000003182

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:

Sandra Stilwell Youngquist

Name of Contact Person

Firm/Company

16876 McGregor Boulevard #101

Address

Fort Myers, FL 33908

City/State and Zip Code

sandy@captivaaislandinn.com

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

For further information concerning this matter, please call:

Sandra Stilwell Youngquist

Name of Contact Person

at (239-233-3724)

Area Code & Daytime Telephone Number

239-233-3724

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: SWFL Children's Charities, Inc.
2. The principal office address: 16876 McGregor Boulevard, Suite 101
Fort Myers, FL 33908
3. The mailing address (if different): _____

4. Date of incorporation/qualification: 3/26/2014 Document number: NO8000003182

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)

ANN
Elaine Hawkins
9736 Commerce Center Court
Fort Myers, FL 33908

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

Sandra Stilwell Youngquist
16976 McGregor Boulevard, Suite 101
P.O. Box NOT acceptable
Fort Myers, FL 33908

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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.

Sandra Stilwell Youngquist Sandra Stilwell Youngquist
Signature of an officer or director 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 Stilwell Youngquist 7/13/18
Signature of Registered Agent Date

If signing on behalf of an entity:

President - SWFL Children's Charities, Inc.
Typed or Printed Name

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