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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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C/mj  
[Signature]

1-22-10



Linda M. Robison  
Direct Dial: 954-703-3901  
Direct Fax: 954-707-4540  
linda.robison@fowlerwhite.com

January 20, 2010

**BY U.S. MAIL**

Florida Department of State  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Re:        *Change of Registered Agent  
             for Happy Tailz Pet Rescue, Inc.***

Dear Sir or Madam:

Enclosed please find for filing on behalf of the above-referenced company is an original and duplicate copy of Statement of Change of Registered Agent for a Corporation and a check in the amount of \$43.75, payable to Florida Department of State for the filing fee and certified copy.

Evidence of the filing should be directed to my office at the address referenced below.

If you have any problems regarding these filings, please do not hesitate to contact the undersigned at 954.703.3900. Thank you for your assistance.

Very truly yours,

A handwritten signature in cursive script that reads 'Linda M. Robison'.

Linda M. Robison

LMR/aja  
Enclosures

cc:    *Via Email*  
      *Jacklyn Treneer (w/out attachments)*

**FOWLER WHITE BOGGS P.A.**

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SUITE 400, 1200 EAST LAS OLAS BOULEVARD • FORT LAUDERDALE, FLORIDA 33301  
TELEPHONE (954) 703-3900 • FAX (954) 703-3939 • [www.fowlerwhite.com](http://www.fowlerwhite.com)

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Happy Tailz Pet Rescue, Inc.  
Name of Corporation

**DOCUMENT NUMBER:** N09000007745

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:

Jacklyn Treneer  
Name of Contact Person

Happy Tailz Pet Rescue, Inc.  
Firm/Company

920 NE 35th Street  
Address

Oakland Park, FL 33334  
City/State and Zip Code

jtangels54@aol.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jacklyn Treneer at ( 954 ) 295-9122  
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: Happy Tailz Pet Rescue, Inc.
2. The principal office address: 920 NE 35th Street  
Oakland Park, FL 33334
3. The mailing address (if different): \_\_\_\_\_
4. Date of incorporation/qualification: 8/7/09 Document number: N09000007745
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)

Michael S. Byrnes

1200 E. Las Olas Blvd, Suite 400

Fort Lauderdale, FL 33301

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

Jacklyn Treneer

920 NE 35th Street

P.O. Box NOT acceptable

Oakland Park, FL 33334

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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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.

Jacklyn Treneer  
Signature of an officer or director

Jacklyn Treneer, 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.*

Jacklyn Treneer  
Signature of Registered Agent

January 11, 2010  
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 (8/05)