

N100000 010 727

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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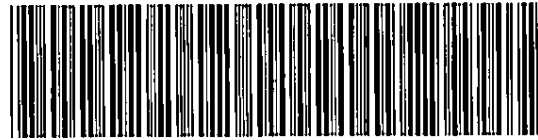
(Business Entity Name)

(Document Number)

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OCT 09 2019

## COVER LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: Flamin' Flamings Military Order of Devil Dog Fleas, INC  
Name of Corporation

DOCUMENT NUMBER: N10000010727

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:

Sharon A. Back

Name of Contact Person

Firm/Company

PO Box 906

Address

Elfers, FL 34680

City/State and Zip Code

backshar@gmail.com

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

For further information concerning this matter, please call:

Sharon A. Back

Name of Contact Person

at ( 770 ) 548-7585

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: Flamin" Flamingoes Military Order of Devil Dog Fleas, INC  
2. The principal office address: 7241 Baillie Drive, New Port Richey, FL 34653

3. The mailing address (if different): PO Box 906, Elfers, FL 34680

4. Date of incorporation/qualification: 11/17/2010 Document number: N10000010727

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)

Janice A. Draper - Resigned

1331 Canberley Court

Trinity, FL 34655

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

Sharon A. Back

9428 Conservation Drive

P.O. Box NOT acceptable

New Port Richey, FL 34655

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

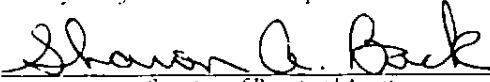
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

  
Signature of an officer or director

Evelyn Joppa-Vice 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

Sept 16, 2019  
Date

If signing on behalf of an entity:

\_\_\_\_\_  
Typed or Printed Name

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