

N1100000 2389

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

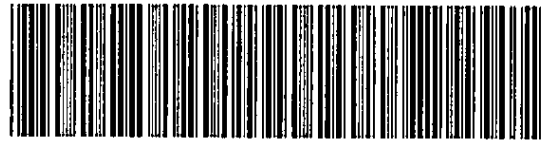
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



500325985055

03/14/13--01013--014 **55.00

FILED
2018 APR -2 PM 3:59

RH/R0/ch8

APR 02 2019

I ALBRITTON

COVER LETTER

TO: Amendment Section
Division of Corporations

Southwest Florida League of Cities

SUBJECT: _____
Name of Corporation
N11000002389

DOCUMENT NUMBER: _____

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:

Rachel Keesling

Name of Contact Person

Southwest Florida League of Cities

Firm/Company

P.O. Box 510013

Address

Punta Gorda, FL 33951

City/State and Zip Code

southwestflc@icloud.com

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

For further information concerning this matter, please call:

Rachel Keesling

941 628-1141

Name of Contact Person

at (_____) _____
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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 23, 2019

RACHEL KEESLING
P.O. BOX 510013
PUNTA GORDA, FL 33951

SUBJECT: SOUTHWEST FLORIDA LEAGUE OF CITIES INC
Ref. Number: N11000002389

We have received your document for SOUTHWEST FLORIDA LEAGUE OF CITIES INC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Irene Albritton
Regulatory Specialist II

Letter Number: 919A00005785

RECEIVED

2019 MAR 32 PM 1:47

TALLAHASSEE

*Signed -
Frank
you!
Rachel
Keesling*

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 _____ in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Southwest Florida League of Cities INC
2. The principal office address: 850 Bimini Lane, Punta Gorda, FL 33950
3. The mailing address (if different): P.O. Box 510013, Punta Gorda, FL 33951

4. Date of incorporation/qualification: 3/07/2011 Document number: N11000002389

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)

Trish Fancher

1560 Matthew Drive Unit C

Fort Myers, FL 33907

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

Rachel Keesling

850 Bimini Lane

P.O. Box NOT acceptable

Punta Gorda, FL 33950

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

William Ribble, 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

03/22/2019

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 (03/12)

FILED
2018 APR -2 PM 3:39