

N11000004051

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

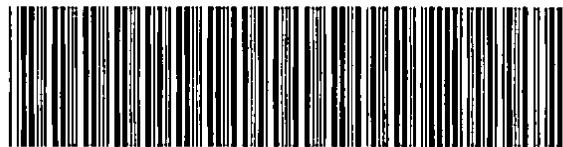
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01/23/23--01013--027 **35.00

2023 JUL 24 PM 12:26
CLERK OF COURT
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CLERK OF COURT

7/29/2023

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Franklin County School Nutrition Association, INC
Name of Corporation

DOCUMENT NUMBER: N11000004051

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:

Natasha Creamer

Name of Contact Person

Franklin County School Nutrition Association

Firm/Company

1250 US HWY 98

Address

Eastpoint, FL 32328

City/State and Zip Code

ncreamc@fcsdfl.org

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

For further information concerning this matter, please call:

Natasha Creamer

Name of Contact Person

at (850)

670-2832

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
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 29, 2023

NATASHA CREAMER
1250 US HIGHWAY 98
EASTPOINT, FL 32328

SUBJECT: FRANKLIN COUNTY SCHOOL NUTRITION ASSOCIATION, INC.
Ref. Number: N11000004051

We have received your document for FRANKLIN COUNTY SCHOOL NUTRITION ASSOCIATION, 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):

You failed to make the correction(s) requested in our previous letter.

We are enclosing a computer printout which reflects the registered agent and registered office now on file with this office. Please amend your document accordingly.

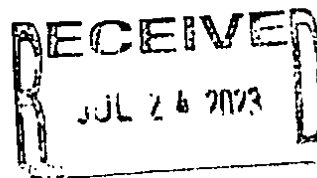
A business entity may not serve as its own registered agent. Please designate an individual or another business entity with an active registration or filing with this office, having a Florida street address identical with that of the registered office.

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.

Claretha Golden
Regulatory Specialist II

Letter Number: 623A00009617





FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 26, 2023

NATASHA CREAMER
1250 US HIGHWAY 98
EASTPOINT, FL 32328

SUBJECT: FRANKLIN COUNTY SCHOOL NUTRITION ASSOCIATION, INC.
Ref. Number: N11000004051

We have received your document for FRANKLIN COUNTY SCHOOL NUTRITION ASSOCIATION, 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):

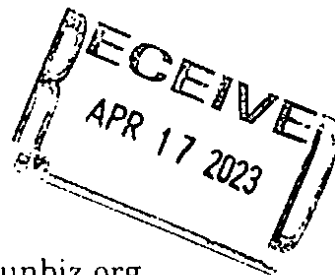
A business entity may not serve as its own registered agent. Please designate an individual or another business entity with an active registration or filing with this office, having a Florida street address identical with that of the registered office.

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.

Claretha Golden
Regulatory Specialist II

Letter Number: 823A00006933



www.sunbiz.org

**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: Franklin County School Nutrition Association, INC
2. The principal office address: 1250 US HWY 98, Eastpoint FL 32328
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 4/19/2011 Document number: 811000004051
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)

Shelley Ingram Franklin County School Nutrition Association
1250 US HWY 98
Eastpoint, Florida 32328

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

Shelley Ingram
1250 US HWY 98
Eastpoint, FL 32328
P.O. Box NOT acceptable

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.

Natasha Creamer
Signature of an officer or director

Natasha Creamer-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.*

Shelley Ingram
Signature of Registered Agent

1/19/2023

Date

If signing on behalf of an entity:

Shelley Ingram

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 (04/13)