

N110000004486

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

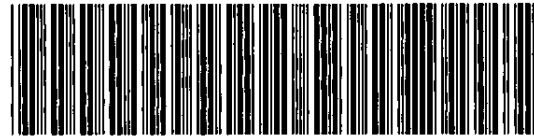
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

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APR 27 2017
I ALBRITTON

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Okaloosa Public Arts

Name of Corporation

DOCUMENT NUMBER: N11000004486

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:

SHIRLEY NAPIER

Name of Contact Person

OKALOOSA PUBLIC ARTS

Firm/Company

1003 SHALIMAR POINTE DR.

Address

SHALIMAR, FL 32579

City/State and Zip Code

shirley.a.napier@cox.net

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

For further information concerning this matter, please call:

SHIRLEY NAPIER

Name of Contact Person

at (850) 651-8300

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

April 6, 2017

SHIRLEY NAPIER
OKALOOSA PUBLIC ARTS INC
1003 SHALIMAR POINTE DR
SHALIMAR, FL 32579

SUBJECT: OKALOOSA PUBLIC ARTS INC.
Ref. Number: N11000004486

We have received your document for OKALOOSA PUBLIC ARTS 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):

An officer of the corporation must sign the document in the space provided

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: 917A00006661

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17 APR 27 PM 12:11

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

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: Okaloosa Public Arts INC.
2. The principal office address: 533 Pocahontas Drive, Fort Walton Beach, FL 32547
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 09/28/2011 Document number: N11000004486
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)

Barbara Lord

533 Pocahontas Drive

Fort Walton Beach, FL 32547

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

SHIRLEY NAPIER

1003 SHAUMAR POINTE DR.

P.O. Box NOT acceptable

SHAUMAR, FL 32519

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TALLAHASSEE, FLORIDA

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.

Bernadette S. Sims
Signature of an officer or director

Bernadette S. Sims - 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.

Shirley Napier
Signature of Registered Agent

2/22/17
Date

If signing on behalf of an entity:

SHIRLEY NAPIER
Typed or Printed Name

OKALOOSA PUBLIC ARTS * FILING FEE: \$35.00 * * *

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314