N/3000007177

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|-----------------------------------------|---|
| (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: | |
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COVER LETTER

| TO: Amendment Section Division of Corporations | | |
|-----------------------------------------------------------------------------------------------|--|--|
| SUBJECT: Friends of Clearwater, Jac. Name of Corporation | | |
| DOCUMENT NUMBER: N13000007177 | | |
| 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: | | |
| | | |
| Name of Contact Person | | |
| / Name of Contact Person | | |
| NA | | |
| Firm/Company | | |
| 331 CLEVELAND ST. #701 | | |
| Address | | |
| CLEARWATER F1. 33755 City/State and Zip Code | | |
| E-mail address: (to be used for future annual report notification) | | |
| For further information concerning this matter, please call: | | |
| LYNN RIBLEY at (412) 216 0770 Name of Contact Person Area Code & Daytime Telephone Number | | |
| ' 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 Street Address: Amendment Section | | |
| Division of Corporations Division of Corporations | | |
| P.O. Box 6327 Clifton Building | | |
| Tallahassee, FL 32314 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 |
| 1. The name of the corporation: Friends of Clear water, Inc. |
| 2. The principal office address: 331 Clevel and St Stute 5 |
| Clearwater, FL 33755-4013 |
| 3. The mailing address (if different): |
| 4. Date of incorporation/qualification: 8/12/13 Document number: N130000071 |
| 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) |
| Sarah J. Donovan |
| RESIGNED 331 Cleveland Street - Suite 5 |
| |
| Clearwater, FL 33755-4013 |
| 6. The name and street address of the new registered agent (if changed) and /or registered office (if changed): |
| LYNN RIBLEY |
| 331 CLEVELAND ST. U. 701 P.O. Box NOT acceptable |
| |
| CLEARWATER, Fl. 33755 |
| 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. |
| Signapore of an officer or director Cathy Protrowski Treasurer. Printed or typed name and title |
| I hereby accept the appointment as registered agent and agree to act in this capacity. |
| 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 9-18-20/3 Date |
| Signature of Registered Agent Date |
| If signing on behalf of an entity: |
| |
| Typed or Printed Name |

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