

N1400000 2856

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

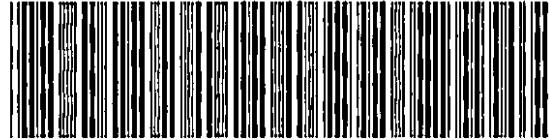
(Business Entity Name)

(Document Number)

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01/02/20--01012--021 \*\*10.00

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19 DEC 23 AM 9:55  
TALLAHASSEE, FLORIDA

JAN 02 2020

S. YOUNG

NOV 28 2019  
S. YOUNG



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

November 27, 2019

KRISTEN MENDEZ  
NEW TAGS FOR HOMELESS PETS INC  
4600 140TH AVENUE N STE 100 #18062  
CLEARWATER, FL 33762

SUBJECT: NEW TAGS FOR HOMELESS PETS INC  
Ref. Number: N14000002856

We have received your document for NEW TAGS FOR HOMELESS PETS INC and check(s) totaling \$25.00. However, the document has not been filed and is being returned for the following reason(s):

There is a balance due of \$10.00. Please return a copy of this letter to ensure your money is properly credited.

The form you submitted is for a LLC, but your entity is a CORPORATION. Please complete and return the enclosed blank form(s).

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.

Shelia H Young  
Regulatory Specialist II

Letter Number: 119A00024169

2019 DEC 23 PM 1:55

## COVER LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: New Tags for Homeless Pets INC  
Name of Corporation

DOCUMENT NUMBER: N1400000 2856

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:

Kristen Mendez  
Name of Contact Person

New Tags for Homeless Pets INC  
Firm/Company

4600 140<sup>th</sup> Ave S, Ste 100, #18062  
Address

Clearwater FL 33762  
City/State and Zip Code

Sent2kris@yahoo.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Kristen Mendez at ( 678 ) 488-0038  
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  
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 FL in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: New Tags for Homeless Pets INC
2. The principal office address: 4600 140<sup>TH</sup> Ave N, Ste 100, #18062  
Clearwater FL 33762
3. The mailing address (if different): 4600 140<sup>TH</sup> Ave
4. Date of incorporation/qualification: 3/21/14 Document number: N14000002856
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)

12400 US Hwy 19 N T20  
Clearwater FL 33764  
Kristen Mendez

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

Kristen Mendez  
10575 68<sup>TH</sup> Ave N, Ste B-2  
Seminole FL 33772

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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.

Kristen Mendez manager  
Signature of an officer or director

Kristen Mendez manager  
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.

Kristen Mendez manager  
Signature of Registered Agent

12/12/19  
Date

If signing on behalf of an entity:

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

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

\$25 already on file

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

CR2E045 (04/13)

\$50 check enclosed