

N 14 0000 11073

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

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2020 JUN 15 AM 7:39

C. GOLDEN

JUL 29 2020

COVER LETTER

TO: Amendment Section
Division of Corporations

2020.01.13 2:28

SUBJECT: new officer

Name of Corporation _____

DOCUMENT NUMBER: n14000011073

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:

Jessica Risher

Name of Contact Person

Lake weir hurricane kickoff club, inc

Firm/Company

10351 se Maricamp rd

Address

Ocala, fl 34472

City/State and Zip Code

jessicarisher@gmail.com

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

For further information concerning this matter, please call:

Jessica risher

at (574) 3556605

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 8, 2020

JESSICA RISHER
LAKE WEIR HURRICAN KICKOFF CLUB, INC
10351 SE MARICAMPA RD
OCALA, FL 34472

SUBJECT: LAKE WEIR HURRICANE KICK-OFF CLUB, INC.
Ref. Number: N14000011073

We have received your document for LAKE WEIR HURRICANE KICK-OFF CLUB, 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 document must be signed by the chairman, any vice chairman of the board of directors, its president, or another of its officers listed.

If you have any questions concerning the filing of your document, please call (850) 245-6838.

Cheryl R McNair
Regulatory Specialist II

Letter Number: 220A00009454

**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: lake weir hurricane kickoff club, inc
2. The principal office address: 10351 se Maricamp rd Ocala fl 34472
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 12/01/2014 Document number: n14000011073
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)

Rosemarie monroe

10351 se Maricamp rd

Ocala fl 34472

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

Jessica risher

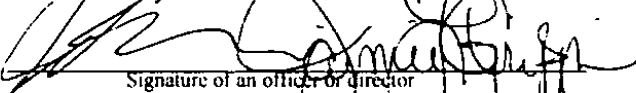
10351 se Maricamp rd

P.O. Box NOT acceptable

Ocala fl 34472

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

Jessica risher Treasurer

Printed or typed name and title

Jaimiel Gri
Secreta

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

February 20th 2020

Date

If signing on behalf of an entity:

Jessica Risher

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)

2020 FEB 15 AM 7:39