114948

(Requestor's Name)
(Address)
(Address)
(isosos),
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
, <u>— — — — — — — — — — — — — — — — — — —</u>
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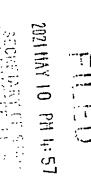
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COVER LETTER

TO:	Amendment Section Division of Corporations
SUBJ Name	ECT: Philaco Woman's Club of Apalachicola, Inc.
DOC	UMENT NUMBER: N14948
The e	nclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.
Pleas	e return all correspondence concerning this matter to the following:
	ca Lemieux of Contact Person
	co Woman's Club of Apalachicola.Inc.
	Company
	30x 983
Addre	
	oint, FL 32328
-	State and Zip Code
	mmlemieux4@gmail.com
E-ma	il address: (to be used for future annual report notification)
For fu	urther information concerning this matter, please call:
Monie	Name of Contact Person at (850) 591-3531 Name of Contact Person Area Code & Daytime Telephone Number
	Name of Contact Person Area Code & Daytime Telephone Number
Enclo	sed 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

CR2E045 (04/13)

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: Philaco Woman's Club of Apalachicola, Inc.
2. The principal office address: 128 Market Street, Apalachicola, FL 32320
3. The mailing address (if different): P O Box 983, Eastpoint, FL 32328
4. Date of incorporation/qualification: 05/16/1986 Document number: N14948
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)
Natalie K Aguiar
564 E Bayshore Drive
Eastpoint, FL 32328
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed): Rachel Chesnut
24 Apalachee Street
P.O. Box NOT acceptable
Apalachicola, FL 32320
The street address of its registered office and the street address of the business office of its registered arent, 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.
Monica Lemieux, Treasurer Signature of an officer or director 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.
Radul Chramt 5/5/2021 Signature of Registered Agent 5/5/2021
If signing on behalf of an entity:
Typed or Printed Name

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