N15000001637

(Re	equestor's Name)					
(Ad	ldress)					
(Ad	dress)					
(Cit	ty/State/Zip/Phone #)					
PICK-UP	☐ WAIT ☐ MAIL					
(Bu	siness Entity Name)					
(Document Number)						
Certified Copies	Certificates of Status					
Special Instructions to	Filing Officer:					

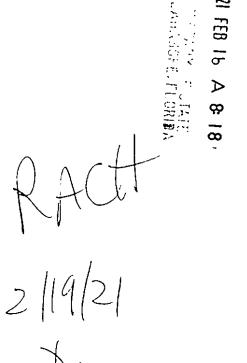
Office Use Only



300274800423

300274800423 02/22/21--01008---002 **35.00

(P)



COVER LETTER

TO:	Amendment Section Division of Corporations				
SUBJI Name	ECT: Friends of Downtown Pensacola, Inc. of Corporation				
DOCU	JMENT NUMBER: N15000001637				
The en	nclosed Statement of Change of Registered	Office/Agent and fee are submitted for filing.			
Please	return all correspondence concerning this	matter to the following:			
Walke	r Wilson				
Name	of Contact Person				
Friend	s of Downtown Pensacola, Inc.				
Firm/C	Company				
226 S.	Palafox Place Suite 106				
Addre	SS				
	rola, FL 32502				
City/S	tate and Zip Code				
	walkerwilson@downtownper				
E-mai	l address: (to be used for future annual	report notification)			
For fu	rther information concerning this matter, p	olease call:			
Walke	r Wilson	at (850) 434-5371 Area Code & Daytime Telephone Number			
	Name of Contact Person	Area Code & Daytime Telephone Number			
Enclos	sed 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 The Centre of Tallahassee				
	Tallahassee, FL 32314 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

statement of cha	provisions of sections 607.0502, 617.0 nge is submitted for a corporation org r to change its registered office or reg	ganized under the laws of	the State of <u>F</u>	lorida	this
1. The name of t	he corporation: Friends of Downtown	Pensacola, Inc.			
2. The principal	office address: 226 S. Palafox Place Su	ite 106 Pensacola, FL 3250)2		
3. The mailing a	ddress (if different): N/A				
4. Date of incorporation/qualification: 01/12/2015 Document number: N15000001637					
	I street address of the current registere tment of State: (If resigned, enter resigned)		lice on file wit	h the	
	Resigned				
	Lissa Dees				C D
	226 S. Palafox Place Suite 106 Pensaco	ola, FL 32502) }- •	3	50
6. The name and (if changed):	street address of the new registered a	gent (if changed) and /or	registered off	11 FEB 16	FILE
	Walker Wilson		12, 12, 12, 12, 12, 12, 12, 12, 12, 12,	> >	П
	226 Palafox Place Suite 106		<u> </u>	ထု	©
	Pensacola, FL 32502	Box NOT acceptable	表 :	8	
as changed will	ess of its registered office and the street be identical.			_	_
Such change wa authorized by th	as authorized by resolution duly ador ne board, or the corporation has been	oted by its board of direct notified in writing of the	tors or by an e e change.	officer s	SO
Elizabe	th Stomaso	Elizabeth Sloman Printed or s	Sec.	te	
I furthér agrée (of my duties, an document is bei	the appointment as registered agent to comply with the provisions of all s d I am familiar with and accept the c ng filed merely to reflect a change in been notified in writing of this chan	tatutes relative to the problems obligation of my position of the registered office add	capacity oper and com as registered dress, I hereb	plete pe l agent, y confir	erformance Or, if this on that the
Walle (N-L	10/15/2020			
Sig	nature of Registered Agent		Date		
If signing on be	half of an entity:				
Walker Wilson	1.00.20				
1	yped or Printed Name				

Make checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, Fl. 32314

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

10 3 8