

N150000002171

(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:

Office Use Only



700292523207

11/21/16--01006--021 \*\*35.00

FILED  
2016 NOV 21 PM 12:51  
FALL RIVER, MA

R. A. Chas

NOV 22 2016  
I ALBRITTON

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** PHOENIX RISING COMMUNITY, INC.  
Name of Corporation

**DOCUMENT NUMBER:** N150000002171

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:

JACK KULAS  
Name of Contact Person

N/A  
Firm/Company

3720 SW 15<sup>TH</sup> STREET  
Address

GAINESVILLE, FL 32608  
City/State and Zip Code

JACK\_KULAS@HOTMAIL.COM  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

JACK KULAS at (352) 219-4338  
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 FLORIDA in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: PHOENIX RISING COMMUNITY, INC.
2. The principal office address: 3720 SW 15<sup>th</sup> STREET  
GAINESVILLE, FL 32608
3. The mailing address (if different): P.O. BOX 1004  
ARCHER, FL 32618
4. Date of incorporation/qualification: 03/02/2015 Document number: N15000002171
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)

SHELBY HAVENS  
3720 SW 15<sup>th</sup> STREET  
GAINESVILLE, FL 32608

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

JACK KULAS  
3720 SW 15<sup>th</sup> STREET  
GAINESVILLE, FL 32608

P.O. Box NOT acceptable

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.

SHELBY HAVENS  
Signature of an officer or director

SHELBY HAVENS  
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.

Jack Kulas  
Signature of Registered Agent

10/31/2016  
Date

If signing on behalf of an entity:

JACK KULAS  
Typed or Printed Name

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