## N1500000 4445

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## **COVER LETTER**

Pink Sledgehammers Break Glass Ceilings, Inc. Name of Corporation 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: Julie C. Gibson Name of Contact Person Firm/Company 300 West Harborview Road Address

Santa Rosa Beach, FL 32459

City/State and Zip Code

HAL7m@aol.com

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

For further information concerning this matter, please call:

Bonnie McQuiston

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

TO:

Amendment Section **Division of Corporations** 

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	provisions of sections 607.0502, 617.0502, nge is submitted for a corporation organize to change its registered office or registere	ed under the laws of the State of Florida	
	he corporation: Pink Sledgehamme		nc.
	office address: 300 West Harborviers Beach, FL 32459	w Road	
3. The mailing a	ddress (if different):		
4. Date of incorp	oration/qualification: 05/01/2015	Document number: N1500004	445
	street address of the current registered age tment of State: (If resigned, enter resigned)	•	
	Brad Congleton CPA, Inc.		
	2050 W Co Highway 30A #214	4	. <u>a</u>
	Santa Rosa Beach, FL 32459		VISICE I
6. The name and (if changed):	street address of the new registered agent (	(if changed) and /or registered office	R 20 PM
	C. Ryan Gibson		- Par
	300 W Harborview Road		<u>ت</u>
P.O. Box NOT acceptable Santa Rosa Beach, FL 32459		ceptable	
The street addre	ss of its registered office and the street ad be identical.	dress of the business office of its registe	ered agent,
Such change wa authorized by th	s authorized by resolution duly adopted be e board, or the corporation has been notifi	y its board of directors or by an officer and in writing of the change.	so
Julie C. Gibson			
I further agree i performance of agent. Or. if the	the appointment as registered agent and a o comply with the provisions of all statute my duties, and I am familiar with and acc s document is being filed merely to reflect that the corporation has been notified in v	s relative to the proper and complete ept the obligation of my position as reg t a change in the registered office addre	istered 2ss, I
M		04/06/2016	
/ -	nature of Registered Agent	Date	
	half of an entity:		
C. Ryan Gil	DSON  ped 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 \* \* \*

CR2E045 (03/12)