## NICOOCUICAS

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C. GOLDEN: JUL 2 4 2017

## COVER LETTER

TO: Amendment Section Division of Corporations	
SUBJECT: YOUNG PROFESSIONALS F	OR ANIMAL PROTECTION, INC
DOCUMENT NUMBER: \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	
Please return all correspondence concerning this matter to	· ·
LOY \ Saloci Name of Confac	i Person
YAP Firm/Compa	iny
2107 NW 12th 1	ane
<u>Cape Coral</u> Flority/State and Z	33993 ip code
E-mail address: (to be used for futur	100 . CDM e annual report notification)
For further information concerning this matter, please call:	
Name of Contact Person a	Area Code & Daytime Telephone Number
Enclosed is a \$35.00 check made payable to the Departmer	n of State.
Mailing Address: Amendment Section	Street Address: Amendment Section

Division of Corporations

Tallahassee, FL 32301

2661 Executive Center Circle

Clifton Building

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

CR2F045 (03/12)

## 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: YOUNG PROFESSIONALS FOR ANIMAL PROTECTION, INC
2. The principal office address: 15601 TRIPLY CROWN CT FT MYERS, FL 33712
3. The mailing address (if different): changing principal & mailing addiess to
addiess below piewse.
4. Date of incorporation/qualification: 02/15/2016 Document number: N1600001628
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)
Kimberly Spilman (Resigned)
15601 TRIPLE CROWN CT SEE 3
Ft myERS, FL 339112
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Lori salgado
2107 NW 12th Lare Str. 3
Cape Coral, FL 33993
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 insofficer or director Kimber 1/2 Spilman, arrent Presiden
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 Hegistered Agent  7/12/Date
It signing on behalf of an entity:
Typed or Printed Name
* * * FILING FEE: \$35.00 * * *

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL 10: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEL, FL 32314 CR2E045 (03/12)