

N16000006551

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

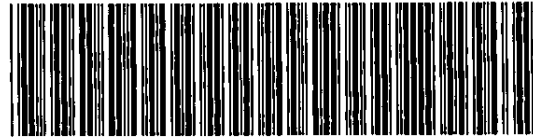
(Document Number)

Certified Copies _____

Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



700291819417

11/22/16--01014--015 **35.00

RECEIVED
CLERK OF COURT
2016 NOV 21 AM 8:17

NOV 28 2016

C LEWIS



FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 1, 2016

DENISE M. TARTAGLIA / PAWS N CLAWS PET FOOD PANTRY INC
PO BOX 1196
LEHIGH ACRES, FL 33970 US

SUBJECT: PAWS N CLAWS PET FOOD PANTRY INC.
Ref. Number: N16000006551

We have received your document for PAWS N CLAWS PET FOOD PANTRY INC.. However, upon receipt of your document no check was enclosed. Please send a check or money order payable to the Department of State for \$35.00. Your document will be retained in our pending file. Please return a copy of this letter to ensure that your check is properly credited.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Carolyn Lewis
Regulatory Specialist II

Letter Number: 616A00023389

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Paws N Claws Pet Food Pantry, Inc
Name of Corporation

DOCUMENT NUMBER: N16000006551

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:

Denise M. Tartaglia
Name of Contact Person

Paws N Claws Pet Food Pantry, Inc
Firm/Company

PO Box 1196
Address

Lehigh Acres, FL 33970
City/State and Zip Code

pncpetfoodinc@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Denise M Tartaglia at (239) 822-8604
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

RECEIVED
16 OCT 31 PM 2:03
DEPT. OF STATE
DIVISION OF CORPORATIONS
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: Paws N Claws Pet Food Pantry, Inc.
2. The principal office address: 392 Leighton Ct
Lehigh Acres, FL 33936
3. The mailing address (if different): PO Box 1196
Lehigh Acres, FL 33970
4. Date of incorporation/qualification: June 29, 2016 Document number: N16000006551
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)

Dawn M Mathisen - Resigned

1066 Countess Ave

Lehigh Acres, FL 33974

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

Denise M Tartaglia

392 Leighton Ct

P.O. Box NOT acceptable

Lehigh Acres, FL 33936

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.

Denise M Tartaglia
Signature of an officer or director

Denise M. Tartaglia - president
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.

Denise M Tartaglia
Signature of Registered Agent

10-27-16
Date

If signing on behalf of an entity:

Denise M Tartaglia - Paws N Claws Pet Food Pantry, Inc
Typed or Printed Name

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

CR2E045 (03/12)

FILED
DIVISION OF CORPORATIONS
2016 NOV 21 AM 8:13