

N160000009421

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

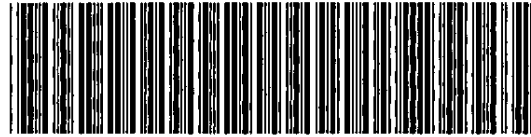
(Business Entity Name)

(Document Number)

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DIVISION OF CORPORATIONS
17 MAY 30 PM 4:15

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JUN - 7 2017

D CUSHING

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: PHIL ROYAL LEGACY, INC

Name of Corporation

DOCUMENT NUMBER: N16000009421

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:

TABITHA WELLS

Name of Contact Person

WELLS BUSINESS SOLUTIONS, LLC

Firm/Company

107 N APOPKA AVE

Address

INVERNESS, FL 34450

City/State and Zip Code

TABITHA@WELLSBIZSOLUTIONS.COM

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

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17 MAY 30 PM 4:15

For further information concerning this matter, please call:

TABITHA WELLS

Name of Contact Person

at **(352) 423-4290**

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 18, 2017

TABITHA WELLS
WELLS BUSINESS SOLUTIONS, LLC
107 N APOPKA AVE
INVERNESS, FL 34450

SUBJECT: PHIL ROYAL LEGACY, INC.
Ref. Number: N16000009421

We have received your document for PHIL ROYAL LEGACY, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

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

Diane Cushing
Senior Section Administrator

Letter Number: 617A00010049

RECEIVED
17 MAY 30 AM 9:54
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

**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: PHIL ROYAL LEGACY, INC.
2. The principal office address: 5121 E TANGELO LANE, INVERNESS FL 34453
3. The mailing address (if different): PO BOX 3003, INVERNESS FL 34451
4. Date of incorporation/qualification: SEPTEMBER 26, 2016 Document number: N16000009421
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)

DR FRED J HERZOG, PHD LLC

1201 W BEAGLE RUN LOOP

HERNANDO FL 34442

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

WELLS BUSINESS SOLUTIONS, LLC

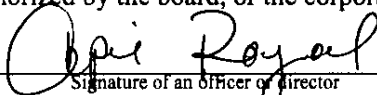
107 N APOPKA AVE

P.O. Box NOT acceptable

INVERNESS, FL 34450

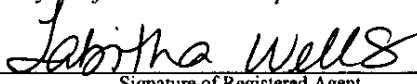
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

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 an officer or director

April Royal - 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.


Signature of Registered Agent

5/24/2017
Date

If signing on behalf of an entity:

TABITHA WELLS

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
SECRETARY OF STATE
DIVISION OF CORPORATIONS
17 MAY 30 PM 4: 15