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COVER LETTER

TO:	Amendment Section			
	Division of Corporations			
	ECT: Polk County Pearls Foundation, Inc.			
Name	of Corporation			
DOCU	JMENT NUMBER: N18000001645			
The en	iclosed Statement of Change of Registered	Office/Agent and fee	are submitted for filing.	
Please	return all correspondence concerning this	matter to the followir	ng:	
Cassan	ndra L. Denmark			
Name	of Contact Person			
Law O	Office of Cassandra L. Denmark, LLC			
Firm/C	Company			
690 Ea	ist Davidson Street			
Addre	SS			
Bartov	v, Florida 33830			
City/S	tate and Zip Code			
	cbwill71@aol.com			
E-mai	l address: (to be used for future annual	report notification)		
For fu	rther information concerning this matter, p	lease call:		
Caroly	n Brown Williams	at (⁸⁶³	533.4360 and 863.398.6413 de & Daytime Telephone Number	
	Name of Contact Person	`Area Co	de & 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 The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

CR2E045 (04/13)

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

statement of cha	nge is submitted for a corporation organized under the laws of the State of Florida r to change its registered office or registered agent, or both, in the State of Florida.
1. The name of t	he corporation: Polk County Pearls Foundation, Inc.
	office address:
	ddress (if different):
4. Date of incorp	poration/qualification: 2/14/2018 Document number: N18000001645
	street address of the current registered agent and registered office on file with the tment of State: (If resigned, enter resigned)
	Law Office of Cassandra L. Denmark, LLC
	690 East Davidson Street
	Bartow, Florida 33830
6. The name and (if changed):	Bartow, Florida 33830 street address of the new registered agent (if changed) and /or registered office Carolyn Brown Williams 72 1015 Golfview Avenue
	Carolyn Brown Williams
	1015 Golfview Avenue :
	P O Box NOT acceptable
	Bartow, Florida 33830
The street addre	ss of its registered office and the street address of the business office of its registered agent, be identical.
Such change wa authorized by th	is authorized by resolution duly adopted by its board of directors or by an officer so be board, or the corporation has been notified in writing of the change.
Caroli	Carolyn Brown Williams e of an officer or director Printed or typed name and title
Signati	e of an officer or director Printed or typed name and title
I further agrée t of my duties, an document is bei	the appointment as registered agent and agree to act in this capacity. o comply with the provisions of all statutes relative to the proper and complete performance d I am familiar with and accept the obligation of my position as registered agent. Or, if this ng filed merely to reflect a change in the registered office address. I hereby confirm that the been notified in writing of this change.
Carolyx	9 Williams U9/2020 Date Date
	half of an entity:
Carolyn Brown V	Villiams
Ty	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 * * *