

N-18000003915

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

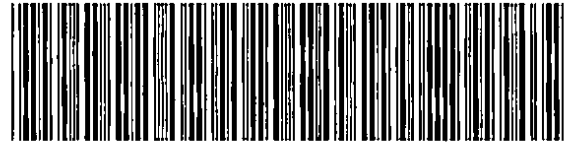
(Business Entity Name)

(Document Number)

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DEC 28 2018

SECRETARY OF STATE
TALLAHASSEE, FL

2018 DEC 17 PM 1:06

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Crossed Paws Pet Rescue INC.
Name of Corporation

DOCUMENT NUMBER: N18000003915

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:

Stefanie Badillo
Name of Contact Person

Crossed Paws Pet Rescue INC.
Firm/Company

106 Margaret St
Address

Auburndale FL 33823
City/State and Zip Code

Sbadillo3@aol.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Stefanie Badillo at 863, 514 0131
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

**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 _____ in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Crossed Paws Pet Rescue Inc
2. The principal office address: 106 MARGARET ST Auburndale
FL 33823
3. The mailing address (if different): New Address 3205 Becker Hwy
WINTER HAVEN FL 33880
4. Date of incorporation/qualification: 4/13/18 Document number: 218000003915
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)

Valentin Badillo
106 MARGARET ST
Auburndale, FL 33823

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

JoAnne Tucker
5622 Davis Rd.
Lakeland, FL 33810

P.O. Box NOT acceptable

SECRETARY OF STATE
TALLAHASSEE, FL

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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.

Stefanie Badillo
Signature of an officer or director

Stefanie Badillo (President/Owner)
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]
Signature of Registered Agent

11/14/18
Date

If signing on behalf of an entity:

Typed or Printed Name

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