

N19 000001572

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____

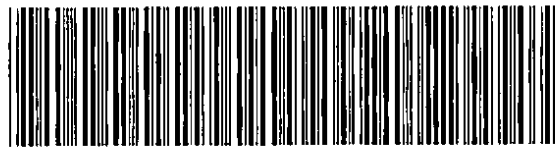
Certificates of Status _____

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2023 MAY 22 10
SECURITY
TALLAHASSEE



COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Youth Sports Of The glades
Name of Corporation

DOCUMENT NUMBER: D1900001572

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:

Donna Moss Flores
Name of Contact Person

Youth Sports of The glades
Firm/Company

655 US Hwy 27 N
Address

South Bay FL 33493
City/State and Zip Code

E-mail address: donna.marie.moss@twing.com
(to be used for future annual report notification)

For further information concerning this matter, please call:

Donna M Flores at 904 261-1416
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
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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: Youth Sports of the Glades, Inc.
2. The principal office address: 1655 US Hwy 27 N
South Bay FL 33493
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 02/07/19 Document number: D1900001572
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)

Linda Santiago
917 Stillwell Rd Apt 2
Belle Glade, FL 33430

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

Donna Moss Flores
1655 US Hwy 27 N
South Bay FL 33493

P.O. Box NOT acceptable

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.

Donna Moss Flores
Signature of an officer or director

Donna Moss Flores, 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.

Donna Moss Flores
Signature of Registered Agent

05/18/23
Date

If signing on behalf of an entity:

Youth Sports of The Glades, 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 (04/13)