

N20000009442

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

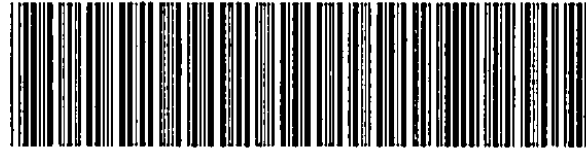
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2022 OCT 24 AM 9:37  
SECRETARY OF STATE  
TALLAHASSEE, FL



# MISSION PURPOSE FOCUS

October 19, 2022

Florida Department of State  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

To whom it may concern,

Please find enclosed request to change our Registered Agent and Registered Office location for your records. Also, please find \$35.00 check to support filing fee, as requested.

If you have any questions or need additional information, please feel free to reach out to me directly, [Rebecca.houlihan@taskforcedagger.org](mailto:Rebecca.houlihan@taskforcedagger.org).

Regards,

*Rebecca Houlihan*

Director of Operations & Immediate Needs Program  
Task Force Dagger Special Operations Foundation

## COVER LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: Task Force Dagger Foundation  
Name of Corporation

DOCUMENT NUMBER: N20000009442

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:

Daniel Perez, Jr.

Name of Contact Person

The Law office of Daniel Perez, Jr., PA

Firm/Company

4115 N. Armenia Ave

Address

Tampa, FL 33607

City/State and Zip Code

DPJR@attorneydanielperez.com

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

For further information concerning this matter, please call:

Daniel Perez, Jr.

at ( 813 ) 873-1400

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, 607.1208, 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: Task Force Dagger Foundation
2. The principal office address: 4115 N. Armenia Ave. Tampa, FL 33607
3. The mailing address (if different): N/A
4. Date of incorporation/qualification: 2009 Document number: \_\_\_\_\_
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)

Alan Williams

6701 Avenida De Calvez

Navarre, FL 32566

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

Daniel Perez, Jr., Esquire

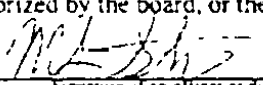
4115 N. Armenia Ave

P.O. Box NOT acceptable

Tampa, FL 33607

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

Mark Stephens

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

10/18/2022  
Date

if signing on behalf of an entity:

Daniel Perez, Jr.

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)

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