

N200000010946

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

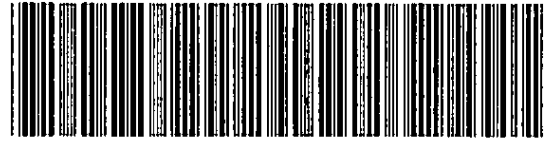
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

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2021 DEC 17 PM 3:30  
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12/17/21

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** WEST BROWARD GIRL'S SOCCER BOOSTER CLUB, INC  
Name of Corporation

**DOCUMENT NUMBER:** N20000010946

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:

SUSAN CEJKA

Name of Contact Person  
WEST BROWARD GIRL'S SOCCER BOOSTER CLUB, INC

Firm/Company  
2177 NW 139TH AVE

Address  
PEMBROKE PINES FL 33028

City/State and Zip Code  
whgsoccerbooster@gmail.com

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

For further information concerning this matter, please call:

SUSAN CEJKA at ( 954 ) 394-2978  
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: WEST BROWARD GIRL'S SOCCER BOOSTER CLUB, INC
2. The principal office address: 2177 NW 139TH AVE, PEMBROKE PINES, FL 33028
3. The mailing address (if different): \_\_\_\_\_
4. Date of incorporation/qualification: 9-24-2020 Document number: N200000010946
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)

Patricia Freire

14400 Stirling Road

Southwest Ranches, Florida 33330

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

Patricia Freire

Error

no new Registered Agent

2177 NW 139th Ave

P.O. Box NOT acceptable

Pembroke Pines FL 33028

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

Susan Cejka, 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

11-30-2021

Date

If signing on behalf of an entity:

Patricia Freire

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)