

N210000005593

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

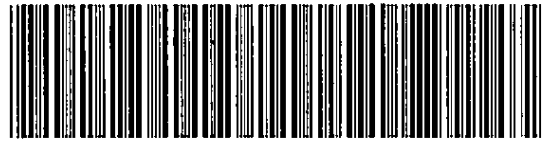
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



600366346446

05/21/21--01012--021 \*\*35.00

FILED

2021 MAY 21 AM 12:49

SECRETARY OF STATE  
TALLAHASSEE, FL

6/10/21  
SP

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Figure Skating Club of Osceola  
Name of Corporation

**DOCUMENT NUMBER:** N21000005593

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:

Kristin Gordon

Name of Contact Person

Figure Skating Club of Osceola

Firm/Company

2241 Partin Settlement Rd

Address

Kissimmee, FL ~~344~~ 34744

City/State and Zip Code

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

For further information concerning this matter, please call:

KRISTIN GORDON at ( 407 ) 579-7677  
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State. ck 945 Kristin Gordon

**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: Figure Skating Club of Osceola
2. The principal office address: 2221 Partin Settlement Rd. Kissimmee, FL 34744
3. The mailing address (if different): \_\_\_\_\_
4. Date of incorporation/qualification: 05/07/21 Document number: 121000005593
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)

GOURAV N. MUKHERJEE ATTORNEY AT LAW P.A.

37 N. ORANGE AVE SUITE 500

ORLANDO, FL 32801

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

OSCAR VARGAS

2221 PARTIN SETTLEMENT RD

P.O. Box NOT acceptable

KISSIMMEE, FL 34744

SECRETARY OF STATE  
TALLAHASSEE, FL

2021 MAY 21 AM 12:49

FILED

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.

Kristin Gordon  
Signature of an officer or director

Kristin Gordon, 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.

Oscar Vargas  
Signature of Registered Agent

5-18-2021

Date

If signing on behalf of an entity:

Oscar Vargas

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)