

N21538

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

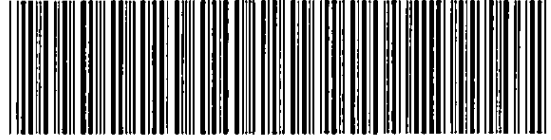
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10/22/2025

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Marjorie Kinnan Rawlings Society, Inc.
Name of Corporation

DOCUMENT NUMBER: N21538

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:

Margaret Anne Pierce, Treasurer

Name of Contact Person

Marjorie Kinnan Rawlings Society, Inc

Firm/Company

249 Herman Drive

Address

Hawthorne, FL 32640

City/State and Zip Code

apedwater@aol.com

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

For further information concerning this matter, please call:

Margaret Anne Pierce

Name of Contact Person

at (352) 231-5032

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

September 16, 2025

MARGARET ANNE PIERCE
249 HERMAN DRIVE
HAWTHORNE, FL 32640

SUBJECT: MARJORIE KINNAN RAWLINGS SOCIETY, INC.
Ref. Number: N21538

We have received your document for MARJORIE KINNAN RAWLINGS SOCIETY, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please correct the entity's document number.

*on attached sheet
ma pin 10/14/25-*

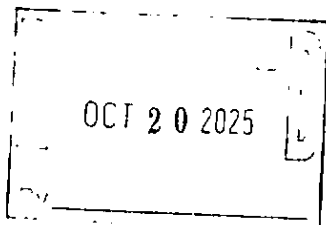
We are enclosing a computer printout which reflects the registered agent and registered office now on file with this office. Please amend your document accordingly.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Claretha Golden
Regulatory Specialist II

Letter Number: 225A00020769



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: Marjorie Kinnan Rawlings Society, Inc.

2. The principal office address: 1215 NW 36th Terrace, Gainesville, FL 32605 US

3. The mailing address (if different): _____

4. Date of incorporation/qualification: 7/13/1987 Document number: N1538 *NOT* N 21538

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)

Resigned: Florence Turcotte

1215 NW 36th Terrace

Gainesville, FL 32605 US

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

Ashley Q. Lear

1648 Promenade Circle

P.O. Box NOT acceptable

Port Orange, FL 32129 US

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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.

Margaret Anne Pierce
Signature of an officer or director

Margaret Anne Pierce, Treasurer
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.

Ashley Lear
Signature of Registered Agent

7/23/25
Date

If signing on behalf of an entity:

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