

N 97000000283

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

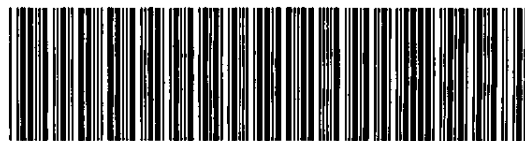
(Business Entity Name)

(Document Number)

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09/12/16--01004--022 **35.00

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SECRETARY OF STATE
CLERK HASSEL GORDON



FLORIDA DEPARTMENT OF STATE
Division of Corporations

September 21, 2016

JANE RAINER
412 TRANQUILLE OAKS DR
OCOE, FL 34761

SUBJECT: OCOEE YOUTH SOCCER LEAGUE, INC.
Ref. Number: N97000000283

We have received your document for OCOEE YOUTH SOCCER LEAGUE, 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):

The document must be signed by the chairman, any vice chairman of the board of directors, its president, or another of its officers.

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.

Carol Mustain
Regulatory Specialist II

Letter Number: 116A00020284

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 _____ in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: OCOEE YOUTH SOCCER LEAGUE, Inc.
2. The principal office address: 1840 A.D. MIMS ROAD
OCOEE, FL. 34761
3. The mailing address (if different): P.O. BOX 930
OCOEE, FL. 34761
4. Date of incorporation/qualification: 01-03-1997 Document number: N97000000283
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)

FRANKIE KRAFT (RESIGNED)
772 LICARIA DR.
OCOEE, FL. 34761

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

JANE RAINER.
AIR TRANQUILLE OAKS DR.
P.O. Box NOT acceptable
OCOEE FL 34761

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.

CORPORATION/BOD NOTIFIED IN WRITING.
Signature of an officer or director

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.

Jane Rainer
Signature of Registered Agent

09-06-16
Date

If signing on behalf of an entity:

JANE RAINER.
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 (03/12)

FILED
2006 OCT -5 PM 12:01
TALLAHASSEE, FL
SECRETARY OF STATE

Roger Gonsalves
Vice-PRESIDENT
ROGER GONSALVES