

P000000 86952

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(Business Entity Name)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FEB 26 2018  
S. YOUNG



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

February 1, 2018

SALLY CRAMER  
OAKLANE KENNELS INC  
2308 OAKLANE ROAD  
VALRICO, FL 33596

SUBJECT: OAKLANE KENNELS, INC.  
Ref. Number: P00000086952

We have received your document for OAKLANE KENNELS, 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):

**CURRENT REGISTERED AGENT MUST BE LISTED**

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.

Shelia H Young  
Regulatory Specialist II

Letter Number: 318A00002203

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DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Oaklane Kennels Inc  
Name of Corporation

**DOCUMENT NUMBER:** P000000086952

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:

Sally Cramer  
Name of Contact Person

Oaklane Kennels Inc  
Firm/Company

2308 Oaklane Rd  
Address

Valrico FL 33596  
City/State and Zip Code

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

For further information concerning this matter, please call:

Sally Cramer at ( 813-957-1319 )  
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  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**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: Oaklane Kennels Inc
2. The principal office address: 2308 Oaklane Rd  
Valrico, FL 33596
3. The mailing address (if different): \_\_\_\_\_
4. Date of incorporation/qualification: 9-12-2000 Document number: P00000086952

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  
TEDDY THOMAS CRAMER  
713 Short 4th Ave  
Middleport Ohio 45760

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

Sally Cramer  
2308 Oaklane Rd  
Valrico FL 33596

P.O. Box NOT acceptable

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**TALLAHASSEE, FLORIDA**

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.

Sally Cramer  
Signature of an officer or director

Sally Cramer 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.*

Sally Cramer  
Signature of Registered Agent

1/26/18  
Date

If signing on behalf of an entity:

OAKLANE Kennels INC  
Typed or Printed Name

\*\*\* FILING FEE: \$35.00 \*\*\*