

PO3000097684

(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



700275443487

07/30/15--01007--012 **35.00

RA
Charge

FILED
2015 JUL 30 PM 4:30
CLERK OF STATE
TALLAHASSEE, FLORIDA

JUL 30 2015
A RAMSEY

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Preferred Pine Straw Inc

Name of Corporation

DOCUMENT NUMBER: _____

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:

Misty Moseley

Name of Contact Person

Preferred Pine Straw Inc

Firm/Company

6766 264th St

Address

Branford FL 32008

City/State and Zip Code

ppsoffice@windstream.net

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

For further information concerning this matter, please call:

Johnny Vincent Owner

Name of Contact Person

at (386) 935-2773

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: Preferred Pine Straw Inc.
2. The principal office address: 6766 264th Street Branford FL 32008
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 9/8/2003 Document number: PD3000097684

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)

Kathleen Shannon

6766 264th st Branford FL 32008

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

Misty Moseley

6766 264th St Branford FL 32008

P.O. Box NOT acceptable

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.

Johnny Vincent
Signature of an officer or director

Johnny Vincent Owner

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.

Misty Moseley
Signature of Registered Agent

07/27/2015

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
CR2E045 (03/12)