

PG4000013044

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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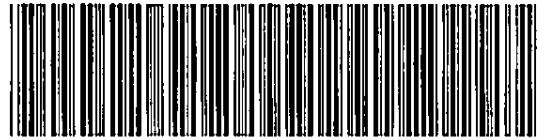
(Business Entity Name)

(Document Number)

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A. Butler  
9/15/21

## COVER LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: PMC Enterprises Division, Inc.  
Name of Corporation

DOCUMENT NUMBER: P04000013044

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:

John T. Cardillo  
Name of Contact Person

Cardillo Keith E. Bonquist, P.A.  
Firm/Company

3550 Tamiami Trail East  
Address

Naples FL 34112  
City/State and Zip Code

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

For further information concerning this matter, please call:

John T. Cardillo at (239) 774-2229  
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  
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: PML Enterprises Division, Inc
2. The principal office address: 11216 Tamiami Trail N, Ste 212  
Naples, FL 34110
3. The mailing address (if different): \_\_\_\_\_
4. Date of incorporation/qualification: 12/22/03 Document number: PD4000013044
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)

Tom Rieger, PL  
1268 14th Ave N  
Naples, FL 34102

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

John T. Cardillo  
3550 Tamiami Trail East  
P.O. Box NOT acceptable  
Naples, FL 34112

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.

Signature of an officer or director

Printed or typed name and title

President Patrick McHugh

*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.*

Signature of Registered Agent

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 (04/13)