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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

SUBJECT: DRINKELL & ASSOCIATES

Name of Corporation

DOCUMENT NUMBER: P05000071424

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 DRINKELL

Name of Contact Person

UPS STORE

Firm/Company

5020 CLARK ROAD

Address

SARASOTA, FL 34233

City/State and Zip Code

USERJ1647@AOL.COM

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

For further information concerning this matter, please call:

JOHN DRINKELL at (941 ) 320 9480

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

statement of cha	inge is submitted for a corporati	, 617.0502, 607.1508, or 617.1508, Florida ion organized under the laws of the State of or registered agent, or both, in the State of	r <u>FL</u>
1. The name of	the corporation: DRINKELL	& ASSOCIATES	
2. The principal	office address: 5020 CLAR DTA, FL 34233	RK RD	
3. The mailing a	address (if different):		
4. Date of incor	poration/qualification: 05/16/	/2005Document number: P050	00071424
5. The name and		gistered agent and registered office on file	
	JOHN DRINKELL		_
	6558 FIELD SPARRO	OW GLEN	_
	BRADENTON, FL 34	202	201
6. The name an (if changed):		stered agent (if changed) and /or registered of	2018 JUL 28 SECRETARY TALLERHASS
	5020 CLARK RD		
SARASOTA, FL 34233		T. S. F. LORIUS	
	P.	O. Box NOT acceptable	3.55 <b>5</b>
The street addr	ress of its registered office and the identical.	the street address of the business office of	its registered agent,
Such change w	as authorized by resolution dul	y adopted by its board of directors or by a s been notified in writing of the change.	
	eell	JOHN DRINKELL	731y.
-	ute of an officer or director  I the appointment as registered  to comply with the provisions of  f my duties, and I am familiar whis document is being filed mero  I that the corporation has been	Printed or typed name and agree to act in this capacity. of all statutes relative to the proper and covith and accept the obligation of my positiely to reflect a change in the registered of notified in writing of this change.	
X	ell	07/19/2018	
Si	gnature of Registered Agent	Date	
If signing on b	ehalf of an entity:		
<del></del>	Typed or Printed Name	_ <del></del>	

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

ECKS PAYARI E TO ELORIDA DEPARTMENT OF