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EXAMINER

COVER LETTER

TO:	Amendmen Division of	t Section Corporations
		4.27.44
CHDI	CT.	Hidden Acres Ranch, Inc.
SUBJI	oc 1:	Name of Corporation
DOCL	MENT NU	MBER:P07000117160
The en	closed States	ment of Change of Registered Office/Agent and fee are submitted for filing.
Please	return all co	rrespondence concerning this matter to the following:
	•	Dould Tomorols
		David Tomczak Name of Contact Person
		Name of Contact Person
		Hidden Acres Ranch, Inc.
		Firm/Company
٠.	* # .	P.O. Box 1505
		Address
	Distant.	Control was the
3 1-	The second	Inverness, Florida 34451
		City/State and Zip Code
	_	hiddenacresranch@yahoo.com
		E-mail address: (to be used for future annual report notification)
		·
For fu	ther informa	ation concerning this matter, please call:
, 0, 14.		and the same of th
		David Tomczak at (352) 586 - 1199
	Nan	David Tomczak at (352) 586 - 1199 ne of Contact Person Area Code & Daytime Telephone Number
Enclos	ed is a \$35.0	00 check made payable to the Department of State.
ws v.e	an user on the	Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Tallahassee, FL 32301 Street Address: Amendment Section Division of Corporations Clifton Building Tallahassee, FL 32301

\$1.5 Sec.

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	nge is submitted for a corporation	17.0502, 607.1508, or 617.1508, Flori organized under the laws of the State registered agent, or both, in the State (of Florida
			oj rioriaa.
	the corporation: Hidden Acres		- M. () - M
2. The principal	office address: 1300 N. U.S. H	WY 41, Suite # F	
Inverness,	Florida		
3. The mailing a	ddress (if different): P.O. Box 1	505	
Invernes	s, Florida 34451	and the second s	
4. Date of incorp	poration/qualification: 10/25/	2007 - Document number:	P07000117160
	I street address of the current regist tment of State: (If resigned, enter r	ered agent and registered office on file esigned)	e with the
	David Tomczak		
	505 Capri Blvd.		— 3
	Treasure Island, Florida 33	3706	— All Tr
6. The name and (if changed):	istreet address of the new registere	ed agent (if changed) and /or registered	loffice SS
	David Tomczak	<u> </u>	
	1300 N. U.S. HWY 41, Sui		
		Hox NOT acceptable	₹ `
	Inverness, Florida 34451		
The street address changed will	ess of its registered office and the be identical.	street address of the business office	of its registered agent,
Such change wanthorized by the	as authorized by resolution duly a ne board, or the corporation has b	dopted by its board of directors or be een notified in writing of the change	y an officer so ·
		David Tomcza	
I hereby accept	the appointment as registered ag to comply with the provisions of a nd I am familiar with and accept to ing filed merely to reflect a chang s been notified in writing of this c	rent and agree to act in this capacity, all statutes relative to the proper and the obligation of my position as registered office address, I hange.	
		6/12/20	10
Sig	nature of Registered Agent	Date	
If signing on be	chalf of an entity:		
1	'yped or Printed Name	-	

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (8/05)

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