

11000013740

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

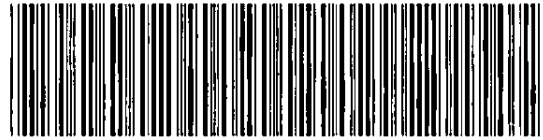
(Business Entity Name)

(Document Number)

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08/26/24 PM 4:14  
STATE  
OFFICE

A. HUNT  
08/26/24

## COVER LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: American Pride International Inc.  
Name of Corporation

DOCUMENT NUMBER: P11000013746

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 Castoro  
Name of Contact Person

American Pride International Inc  
Firm/Company

4420 Ashton Road  
Address

Swasota FL 34231  
City/State and Zip Code

E-mail address: asap.castoro@gmail.com  
(to be used for future annual report notification)

For further information concerning this matter, please call:

John Castoro at (941) 376-8661  
Name of Contact Person Area Code & Daytime Telephone Number  
941-706-3392

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: American Pride International, Inc
2. The principal office address: 4420 Ashton Road  
Sarasota FL 34233
3. The mailing address (if different): \_\_\_\_\_
4. Date of incorporation/qualification: 02/08/2011 Document number: P11000013746
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)

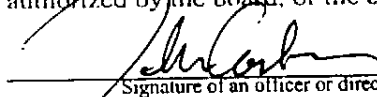
Grace E Outlaw  
4420 Ashton Road  
Sarasota FL 34233

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

John Castoro  
4420 Ashton Road  
P.O. Box NOT acceptable  
Sarasota FL 34233

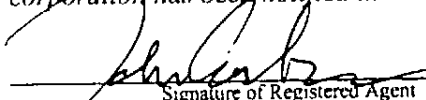
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

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

John Castoro - President  
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.*

  
Signature of Registered Agent

8/22/24  
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