

P11000027494

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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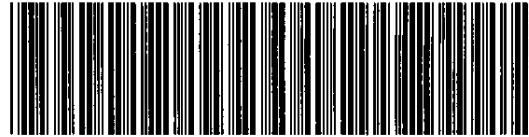
(Business Entity Name)

(Document Number)

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STATE OF FLORIDA  
TALLAHASSEE, FLORIDA

SEP 17 2012

T. LEWIS

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Gifter Club Inc.  
Name of Corporation

**DOCUMENT NUMBER:** P11000027494

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:

Greg Longenhagen  
Name of Contact Person

Gifter Club Inc.  
Firm/Company

12856 Banyan Creek Drive  
Address

Fort Myers FL 33908  
City/State and Zip Code

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

For further information concerning this matter, please call:

Greg Longenhagen at (239) 415-4692  
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**

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: Gifter Club, Inc.  
2. The principal office address: 1413 Causey Ct  
Sanibel FL 33957  
3. The mailing address (if different): 12856 Banyan Creek Drive  
FORT MYERS FL 33908  
4. Date of incorporation/qualification: 3/17/11 Document number: P11000027494  
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)

Greg Longenhagen  
12856 Banyan Creek Drive  
FORT MYERS FL 33908

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

Greg Longenhagen  
1413 Causey Ct  
P.O. Box NOT acceptable  
Sanibel FL 33957

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STATE DEPT OF STATE  
TALLAHASSEE, FLORIDA

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.

Greg Longenhagen  
Signature of an officer or director

Greg Longenhagen Vice Pres.  
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.

Greg Longenhagen  
Signature of Registered Agent

9/10/12  
Date

If signing on behalf of an entity:

\_\_\_\_\_  
Typed or Printed Name

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