

P11 000090578

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

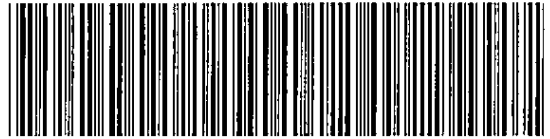
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



900422956439

03/02/24--01:010--012 \*\*35.00

FILED  
2024 FEB -2 AM 9:49  
TALLAHASSEE, FL

*[Handwritten signature]*

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** RED BONE DESIGNS, INC.  
Name of Corporation

**DOCUMENT NUMBER:** P11000090578

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:

ARCHIE PELTIER

Name of Contact Person

RED BONE DESIGNS, INC.

Firm/Company

4851 Tamiami Trail N STE 200, Naples, FL 34103

Address

Naples, FL 34103

City/State and Zip Code

NAC@PRO-NS.NET

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

For further information concerning this matter, please call:

ARCHIE PELTIER

Name of Contact Person

at (763-4867069)

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

FILED  
2024 FEB -2 AM 9:49  
TALLAHASSEE, FL

**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: RED BONE DESIGNS, INC.
2. The principal office address: 4851 Tamiami Trail N STE 200, Naples, FL 34103
3. The mailing address (if different): \_\_\_\_\_
4. Date of incorporation/qualification: 10/15/2011 Document number: P11000090578
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)

ARCHIE PELTIER

1107 KEY PLAZ.

KEY WEST, FL 33040

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

ARCHIE PELTIER

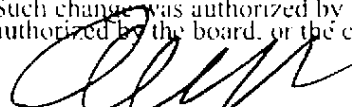
4851 TAMAMI TRAIL SUITE 200

P.O. Box NOT acceptable

NAPLES, FL 34103

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

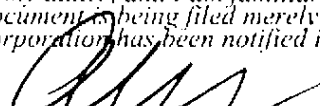
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

  
\_\_\_\_\_  
Signature of an officer or director

ARCHIE PELTIER, CEO

\_\_\_\_\_  
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

01/25/2024

\_\_\_\_\_  
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)

FILED  
2024 FEB -2 AM 9:49  
TALLAHASSEE, FL