P13000011160

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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TALLAHASSEE, FL

JR 09/24/20

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: PAULIES PIZZA COMPANY INC.
Name of Corporation

DOCUMENT NUMBER: P13000011100

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:

PAUL J RICCI JR.
Name of Contact Person

PAULIES PIZZA COMPANY INC
Firm/Company

428 BEACH VILLAGE DR
Address

FLAGLER BEACH FL, 32136
City/State and Zip Code

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

For further information concerning this matter, please call:

PAUL J RICCI JR at (386) 585 0104
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
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

CR2E045 (04/13)

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 _____ _____ in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: PAULIES PIZZA COMPANY INC.
2. The principal office address: 428 BEACH VILLAGE DR. FLAGLER BEACH FL, 32136
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 5/2013 Document number: P13000011100
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)

PAUL J RICCI JR.
4 RANDALL PL
CURRENT → PALM COAST FL, 32164

NEED ADDRESS CHANGED TO →

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

PAUL J RICCI JR
30 RYAPPLE LN
P.O. Box NOT acceptable
PALM COAST FL, 32164

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TALLAHASSEE, FL

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

PAUL J RICCI JR - OWNER (P
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

7/29/2020
Date

If signing on behalf of an entity:

PAUL J RICCI JR
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)