

P13000074972

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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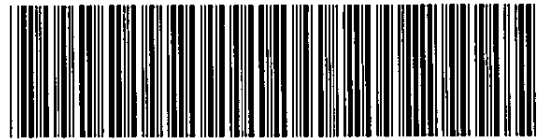
(Business Entity Name)

(Document Number)

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R. WHITE

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TALLAHASSEE, FLORIDA

SUNSHINE CORPORATE & FILING SERVICES, INC.

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COVER LETTER

WALK IN

ENTITY NAME: Mickey's Tiki, Inc.

CK # 1768

AMOUNT: 3500

PLEASE FILE THE ATTACHED AND RETURN:

☒ PLAIN COPY

☐ CERTIFIED COPY

PLEASE CONTACT TINA AT 850-508-1891 FOR
FURTHER INFORMATION ON THIS MATTER.

THANK YOU!

TINA GOFF, PRESIDENT

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: MICKEY'S TIKI INC.
Name of Corporation

DOCUMENT NUMBER: P13000074972

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:

ALAN BROWNFELD

Name of Contact Person

MICKEY'S TIKI INC.

Firm/Company

350 SW 12TH AVE.

Address

POMPANO BEACH, FL 33069

City/State and Zip Code

BROWNFELDAUTO@AOL.COM

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

For further information concerning this matter, please call:

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

1. The name of the corporation: MICKEY'S TIKI INC.
2. The principal office address: 350 SW 12TH AVENUE
POMPAÑO BEACH, FL 33069
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 09/11/2013 Document number: P13000074972

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)

WISE, LISA

350 SW 12TH AVENUE

POMPAÑO BEACH, FL 33069

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

URS AGENTS, LLC

1540 GLENWAY DRIVE

P.O. Box NOT acceptable

TALLAHASSEE, FL 32301

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.

Alan Brownfeld
Signature of an officer or director

ALAN BROWNFELD, 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.

Amanda C. Sanders
Signature of Registered Agent

JUNE 19, 2015

Date

If signing on behalf of an entity:

AMANDA SANDERS

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