P13000084776

(Requestor's Name)
(Address)
(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



200288194882

07/29/16--01026--016 **35.00

MIL JUL 29 F 12: 24
SEGRETARY OF SOME

AUG 08 2016 T. LENMEUX

COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Stilt House Brewery Inc. Name of Comporation
DOCUMENT NUMBER: 7 13000084 776
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 Dakoff Name of Contact Person
Stilt House Brewery Inc.
625 Alt 19 Address
Palm Harbor FL 34683 City/State and Zip Code
E-mail address (to be used for future annual report notification)
For further information concerning this matter, please call:
Alan Dakott at (727) 237-8487 Name of Contact Person Area Code & Daytime Telephone Number
Enclosed is a \$35.00 check made payable to the Department of State.
Mailing Address: A mondment Section A mondment Section

Division of Corporations

Tallahassee, FL 32301

2661 Executive Center Circle

Clifton Building

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

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 Florical in order to change its registered office or registered agent on both in 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: Stilt House Brewery Inc.
2. The principal office address: 625 Alt 19 Palm Harbor FL 34683
•
3. The mailing address (if different):
4. Date of incorporation/qualification: October 15, 2013 Document number: P13000084776
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)
Samuel T. Price - RESIGNED
1829 Douglas Av.
Dunedin, FL 34698
6. The name and street address of the new registered agent (if changed) and /or registered offices (if changed):
7516 Birdwood Ct.
New Port Richey, FL 34653-2102
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.
Margaret R. Dakoff - Secretary 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 Respected Agent Date
If signing on behalf of an entity:
Alan Dakoff
Typed or Printed Name

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

..