

P140000 41415

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

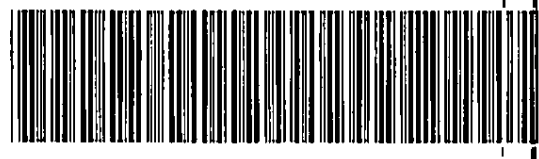
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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JAN 17 2018

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18 JAN 16 PM 2:38

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RIA-CH



FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 21, 2017

KATHRYN SHAW
TORCANA USA, INC
1128 3RD ST N
ST PETERSBURG, FL 33701

SUBJECT: TORCANA USA, INC
Ref. Number: P14000041415

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

We are enclosing a computer printout which reflects the registered agent and registered office now on file with this office. Please amend your document accordingly.

The capacity of the officer/director signing should be indicated. Ex. President, Vice President, Chairman of the Board, etc.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Susan Tallent
Regulatory Specialist II

Letter Number: 917A00025864

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Amended form enclosed as requested.

Many thanks.

Kathryn Shaw.

727-793-7721

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Torcana USA, Inc
Name of Corporation

DOCUMENT NUMBER: P14000041415

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:

Kathryn Shaw

Name of Contact Person

Torcana USA, Inc

Firm/Company

1128 3rd St N

Address

St Petersburg, FL 33701

City/State and Zip Code

kathryn.shaw@torcana.com ✓

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

For further information concerning this matter, please call:

Kathryn Shaw

Name of Contact Person

at (**727**) **793-7721**

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: Torcana USA, Inc
2. The principal office address: 9020 Rancho Del Rio Dri, Suite 100
New Port Richey, FL 34655
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 05/08/2014 Document number: P14000041415
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)

Kathryn Shaw

1128 3rd St N

St Petersburg, FL 33701

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

Jan Marie Doughty


3000 North Atlantic Avenue, Suite 208

P.O. Box NOT acceptable

Cocoa Beach, FL 32931

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.

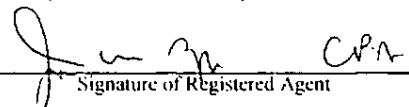


Signature of an officer or director

Kathryn Shaw, 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 Registered Agent

12/13/2017

Date

If signing on behalf of an entity:

Torcana USA, Inc

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

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EX - REGISTERED AGENT