

A4600046974

(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



800296980188

04/03/17--01020--003 **35.00

FILED
2017-3-30 3:16
CLERK OF COURT
CLERK OF COURT

1/5/2017

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: I'll have another
Name of Corporation

DOCUMENT NUMBER: P14000046974

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:

Lori Morreale
Name of Contact Person

none
Firm/Company

9415 Calle Alta
Address

Newport Richey, FL 34655
City/State and Zip Code

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

For further information concerning this matter, please call:

Lori Morreale at (727) 992-4488
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 FL in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: I'll have another, Inc.
2. The principal office address: 9415 Calle Alta
Newport Richery, FL 34655
3. The mailing address (if different): 9415 Calle Alta
Newport Richery, FL 34655
4. Date of incorporation/qualification: 5/27/14 Document number: PH0000046974
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)

NONE He Resigned 2/1/17
Love, Randall J
7236 State Rd 52
Newport, FL 33667

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

Pat Zsiga
8713 Gumtree Ave
P.O. Box NOT acceptable
Newport Richery, FL 34653

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]
Signature of an officer or director

Lori Morreale Pres
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]
Signature of Registered Agent

3/30/17
Date

If signing on behalf of an entity:

Typed or Printed Name

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

FILED
2017 MAR 30 PM 3:16
CLERK OF CIRCUIT COURT
JACKSONVILLE