P15000012965

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COVER LETTER

Amendment Section Division of Corporations

TO:

SUBJECT: palm oakes receivables corporation Name of Corporation		
DOCUMENT NUMBER: P15000012965		
The enclosed Statement of Change of Registered Offi	ice/Agent and fee are submitted for filing.	
Please return all correspondence concerning this matt	er to the following:	
Bryan Misle		
Name of Contact Person		
palm oakes receivable corporation		
Firm/Company		
3581 NW 5th Avenue		
Address		
Oakland Park, FL 33309		
City/State and Zip Code	·	
bryan@tlsunlimited.com		
E-mail address: (to be used for future annual repo	ort notification)	
For further information concerning this matter, please	call:	
Bryan Misle	at (954) 563-1503	
Name of Contact Person	at (954) 563-1503 Area Code & Daytime Telephone Number	
Enclosed is a \$35.00 check made payable to the Depa	Street Address: Amendment Section	
Mailing Address:	Street Address:	
Amendment Section	,	
Division of Corporations	Division of Corporations	
P.O. Box 6327	The Centre of Tallahassee	
Tallahassee, FL 32314	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

statement of cha	nge is submitted for a corporation	17.0502, 607.1508, or 617.1508, Florida organized under the laws of the State of	Florida		
		registered agent, or both, in the State of	Florida.		
1. The name of t	he corporation: palm oakes receival	ble corporation			
2. The principal office address: 3581 NW 5th Avenue Oakland Park Florida 33309					
3. The mailing a	ddress (if different):				
4. Date of incorp	4. Date of incorporation/qualification: 02/06/2015 Document number: P15000012965				
	street address of the current regist tment of State: (If resigned, enter r	tered agent and registered office on file versigned)	vith the		
	business filings incorporated				
	1200 South Pine Island Road		_		
	Plantation, FL 33324				
6. The name and (if changed):	I street address of the new registere	ed agent (if changed) and /or registered o	ffice		
	Bryan Misle		_		
	3581 NW 5th Avenue				
		P.O. Box NOT acceptable	_		
	Oakland Park, FL 33309				
The street address changed will	ess of its registered office and the be identical.	street address of the business office of	its registered agent,		
		dopted by its board of directors or by a cen notified in writing of the change.	(474)		
T3m	on Miele	Bryan Misle	JA:		
Suenatu	re of an officer of director	Printed or typed name and	~		
I hereby accept I further agree of my duties, an document is bei corporation has	the appointment as registered age to comply with the provisions of a d I am familiar with and accept th ng filed merely to reflect a chang s been notified in writing of this ci	ent and agree to act in this capacity, all statutes relative to the proper and co he obligation of my position as register e in the registered office address, I hero hange.	omplête performance i ed ugent. Or if this eby confirm that the		
13ma	n Mile	12/27/2024	· Ħ ±		
Sig	nature of Registered Agent	Date			
If signing on be	half of an entity:				
Bryan Misle		_			
J.	yped or Printed Name	-			

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