P150000 49922

(F	Requestor's Name)	
	Address)	
	Address)	
(0	City/State/Zip/Phone #)	
PICK-UP	WAIT	MAIL
{E	Business Entity Name)	
(Document Number)		
Certified Copies	Certificates of S	Status
Special Instructions t	to Filing Officer:	
	-	

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FLORIDA DEPARTMENT OF STATE Division of Corporations

September 28, 2017

DOUGLAS BAILEY TEH POP SHOP CO P.O. BOX 950721 LAKE MARY, FL 32795

SUBJECT: THE POP SHOP CO. Ref. Number: P15000049922

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):

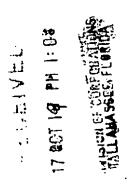
The name of the person signing the document must be typed or printed beneath or opposite the signature.

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: 617A00019686



COVER LETTER

Name of Corporation

DOCUMENT NUMBER: P150000 49922

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

Amendment Section Division of Corporations

SUBJECT: The Pop Shop Co

TO:

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:		
Douglas Bailey		
Name of Contact Person The Pop Shop Co Firm/Company		
P.O. Box 950721		
Lake Mary, FL 32795 City/State and Zip Code		
E-mail address: (to be used for future annual report notification)		
For further information concerning this matter, please call:		
Douglas Bailey Name of Contact Person at (407) 232-7152 Area Code & Daytime Telephone Number		
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 Street Address: Amendment Section		

Division of Corporations

Tallahassec, FL 32301

2661 Executive Center Circle

Clifton Building

CR2E045 (03/12)

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: The Pop Shop Co.
OCOO N. Danada Danasa Dhid
2. The principal office address: 2520 N Ronald Reagan Blvd Longwood, FL 32750
3. The mailing address (if different): P.O. Box 950721
Lake Mary, FL 32795
4. Date of incorporation/qualification: 4 4 15 Document number: P15000049922
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) Diane Clark
1402 SW Peninsula Lane
Palm City, FL 34990
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Douglas Bailey
2520 N Ronald Reagan Blvd P.O. Box NOT acceptable
P.O. Box NOT acceptable
Longwood, FL 32750
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.
Dansing A
Senature of an officer or director 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 copper m that the corporation has been notified in writing of this change.
Signature of Registered Agent
If signing on behalf of an entity:
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

CR2E045 (03/12)