

P160000002087

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

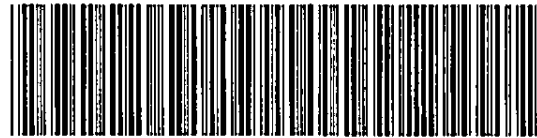
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Michael Thattner
Advised to chg Principal
Address

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2017 AUG 11 PM 1:01
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RA/RO/chg

AUG 17 2017

ALBRITTON

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Palm K9 & Security Services Inc
Name of Corporation

DOCUMENT NUMBER: P16000002087

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:

Michael Trathner
Name of Contact Person

Palm Security Services
Firm/Company

1772 N. W. 68th Dr
Address

Auburne FL 33823
City/State and Zip Code

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

For further information concerning this matter, please call:

Michael Trathner at (321) 888 1299
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 _____ in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Palm Ka & Security Services Inc
2. The principal office address: 1521 7th St SW - Ste 102 B
Winter Haven, FL 33880
3. The mailing address (if different): 1772 Van Gogh Dr
Auburndale FL 33823
4. Date of incorporation/qualification: 12/3/2015 Document number: P16000002087
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)

Resigned Land Back, Alexander M
255 Magnolia, SW
Winter Haven FL 33850

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

New Agent Michael Trattner
1772 Van Gogh Dr
Auburndale FL 33823

P.O. Box NOT acceptable

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

Michael Trattner
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

8/7/17
Date

If signing on behalf of an entity:

Michael Trattner
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)

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SECRETARY OF STATE
TALLAHASSEE, FL 32304