

PIB 000046182

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

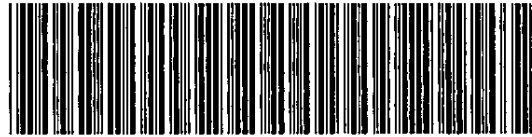
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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2017 APR 13 PM 4:40  
CLERK OF STATE  
ATLANTA, GA

4/13/17

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** White Pelican Realty  
Name of Corporation

**DOCUMENT NUMBER:** P16000046182

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:

Steve Stiffler

Name of Contact Person

White Pelican Realty

Firm/Company

718 S US Hwy 441

Address

Lady Lake, Florida 32159

City/State and Zip Code

Steve@WhitePelicanRealty.com

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

For further information concerning this matter, please call:

Steve Stiffler

Name of Contact Person

at ( 352 ) 388-3738

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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

March 29, 2017

STEVE STIFFLER  
718 S US HWY 441  
LADY LAKE, FL 32159

SUBJECT: WHITE PELICAN REALTY INC.  
Ref. Number: P16000046182

We have received your document for WHITE PELICAN REALTY INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The person designated as registered agent in the document and the person signing as registered agent must be the same.

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.

Carol Mustain  
Regulatory Specialist II

Letter Number: 717A00006060

**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: WHITE PELICAN REALTY INC.
2. The principal office address: 718 S US HWY 441  
Lady lake, Florida 32159
3. The mailing address (if different): \_\_\_\_\_
4. Date of incorporation/qualification: 05/24/2016 Document number: P16000046182
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)

Todd A Brown ( Resigned)

718 S US Hwy 441

Lady Lake, FL 32159

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

Barry A Blake AMBR

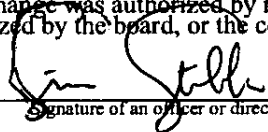
718 S US Hwy 441

P.O. Box NOT acceptable

Lady Lake, FL 32159

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.

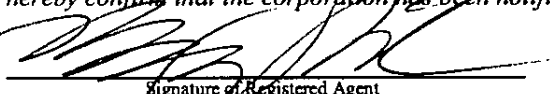


Signature of an officer or director

Steve Stiffler, President

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

March 22, 2017

Date

If signing on behalf of an entity:

Barry A Blake

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)

FILED  
2017 APR 13 PM 4:30  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA