P16000050071

(Requestor's Name)
(includatora Marile)
(Address)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
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5/NOV

COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: Parrots Landing Co.

Name of Corporation

DOCUMENT NUMBER: P16000050071

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:

charlotte tilley

Name of Contact Person

Law Office of Michael R Tilley

Firm/Company

128 Wilderness Cay

Address

Naples FL 34114

City/State and Zip Code

Mike@mrtilley.com

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

For further information concerning this matter, please call:

Chalrotte Tilley

,561

392-5707

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

statement of char	rovisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida age is submitted for a corporation organized under the laws of the State of to change its registered office or registered agent, or both, in the State of	Flori		
1. The name of the	ne corporation: Parrots Landing Co.			
2. The principal of	office address: 3460 NW 50th Avenue Ste 105			
	Lauderdaie Lakes, FL 33319			
3. The mailing ad	idress (if different):			
4. Date of incorpo	oration/qualification: 06/07/2016 Document number:	P160000	5007	1
	street address of the current registered agent and registered office on file vernent of State: (If resigned, enter resigned)	vith the		
	INCORP SERVICES, LLC	<u>.</u>		
- -	17888 67th Court North		7 HA	`
-	Loxahatchee, 33470	IAR) HASSI	1	
6. The name and (if changed):	street address of the new registered agent (if changed) and /or registered o	Mice LOS	AH 11: 2	ED
_	InCorp Services, Inc.	- SE	-	
	17888 67th Court North			
_	P.O. Box NOT acceptable	-		
_	Loxahatchee, FL 33470	_		
The street addres	s of its registered office and the street address of the business office of i	ts register	ed age	ent,
	authorized by resolution duly adopted by its board of directors or by an board, or the corporation has been notified in writing of the change.	officer so	1	
Signature	okan bilicer or director Annied or typed name and it	To the		_
performance of n agent. Or, if this	the appointment as registered agent and agree to act in this capacity of comply with the provisions of all statutes relative to the proper and constitutes, and I am familiar with and accept the obligation of my position document is being filed merely to reflect a change in the registered offing the corporation has been notified in writing of this change.	n as regisi	ered i, I	
Signa	April 25, 2017 United Registered Agent Date			-
If signing on beh	alf of an entity:			
Kathy Shin on	behalf of InCorp Services, Inc.			

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

Typed or Printed Name