

P16000050430

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

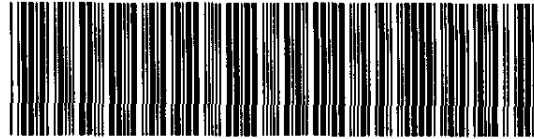
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



800293034038

12/14/16--01016--001 **35.00

S. TALLENT

DEC 19 2016

R/A-CH

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

16 DEC 14 PM 2:44

FILED

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: TUSCAN HILLS RELIGIOUS GIFTS, INC.
Name of Corporation

DOCUMENT NUMBER: P16000050430

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:

JODY HAREL

Name of Contact Person

TUSCAN HILLS RELIGIOUS GIFTS, INC.

Firm/Company

762A S MILITARY TRAIL

Address

DEERFIELD BEACH, FL 33442

City/State and Zip Code

JODY@TUSCANHILLSRELIGIOUS.COM ✓

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

For further information concerning this matter, please call:

JODY HAREL

Name of Contact Person

at ()

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 FLORIDA in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: TUSCAN HILLS RELIGIOUS GIFTS, INC.
2. The principal office address: 762A S MILITARY TRAIL
DEERFIELD BEACH, FL 33442
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 06.08.2016 Document number: P16000050430

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

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

JODY HAREL

762A S MILITARY TRAIL

P.O. Box NOT acceptable

DEERFIELD BEACH, FL 33442

FILED
16 DEC 14 PM 2:44
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

JODY HAREL, VP
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

12/13/2016
Date

If signing on behalf of an entity:

Jody Harel
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)