

P 16000097062

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

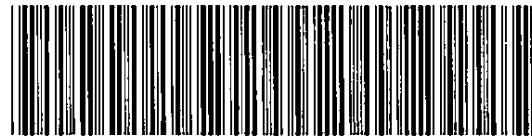
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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S TALLENT
JUN 23 2017

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OFFICE OF THE
CLERK OF SUPERIOR COURT
-ST. LOUIS, MO-



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 13, 2017

GRANT PENNELL
INDIRA INTERNATIONAL
1024 PARK CENTRAL CIRCLE
GROVELAND, FL 34736

SUBJECT: INDIRA INTERNATIONAL CO.
Ref. Number: P16000097062

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):

We are enclosing a computer printout which reflects the registered agent and registered office now on file with this office. Please amend your document accordingly.

A business entity may not serve as its own registered agent. Please designate an individual or another business entity with an active registration or filing with this office, having a Florida street address identical with that of the registered office.

The registered agent must sign accepting the designation.

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: 017A00007255

COVER LETTER 850-245-6897

TO: Amendment Section
Division of Corporations

SUBJECT: INDIRA INTERNATIONAL CO.
Name of Corporation

DOCUMENT NUMBER: P160000 97 062

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:

GRANT PENNELL
Name of Contact Person

INDIRA INTERNATIONAL CO.
Firm/Company

1024 PARK CENTRAL CIRCLE
Address

GROVELAND FLORIDA 34736
City/State and Zip Code

GRANT PENNELL @ HOTMAIL.COM ✓
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

INDIRA PENNELL at (647) 404-7253
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

Rec.
6/23/17

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: INDIRA INTERNATIONAL CO
2. The principal office address: 1024 PARK CENTRAL CIRCLE
GROVELAND FL. 34736
3. The mailing address (if different): 34 Fernbrook Cr. Brampton
Ontario Canada L6Z-3P2
4. Date of incorporation/qualification: DEC 8/2016 Document number: P160000 97062
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)

SHEV SHIWZAM (RESIGNED)
3510 W. VINE ST.
KISSIMMEE FL. 34741

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

GRANT PENNELL
1024 PARK CENTRAL CIRCLE
P.O. Box NOT acceptable
GROVELAND FL 34736

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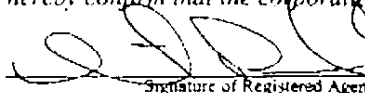
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

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

GRANT PENNELL 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

6/22/17
Date

If signing on behalf of an entity:

INDIRA INTERNATIONAL CO.
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)