

PI 00001588

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

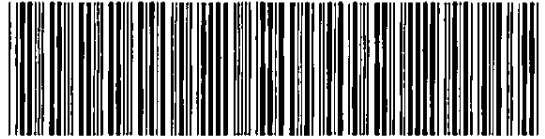
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**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH  
FOR CORPORATIONS**

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: Blinds Plus Shutters + Shades
2. The principal office address: 3569 Talley Ridge Drive  
The Villages, FL 32162
3. The mailing address (if different): \_\_\_\_\_
4. Date of incorporation/qualification: 12/29/2016 Document number: P16000101588
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)  
Michael Glenn  
2325 Griffen Road, Unit 8  
Leesburg, FL 34748
6. The name and street address of the new registered agent (if changed) and/or registered office (if changed):

Carl Siegel & Lynda Siegel  
3569 Talley Ridge Dr  
P.O. Box NOT acceptable  
The Villages, FL 32162

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.

Carl Siegel Lynda Siegel Lynda Siegel, Vice President  
Signature of an officer or director CARL Siegel, 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.

Carl Siegel Lynda Siegel 4/8/2024  
Signature of Registered Agent Date

If signing on behalf of an entity:

\_\_\_\_\_  
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  
CR2ED45 (04/13)