

P17 0000 35190

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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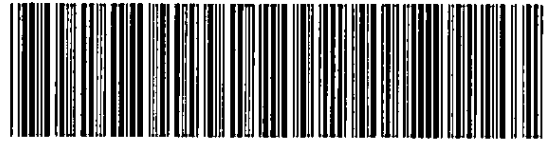
(Business Entity Name)

(Document Number)

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R. WHITE

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FLORIDA DEPARTMENT OF STATE
Division of Corporations

2021 MAR 6 PM 3:29
TALLAHASSEE, FL

March 9, 2021

MS. DANIELLE MUREN
PO BOX 1516
PALATKA, FL 32178

SUBJECT: ALLPAC WORLDWIDE, INC.
Ref. Number: P17000035190

We have received your document for ALLPAC WORLDWIDE, 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):

There can only be one registered agent on file. Please choose which registered agent you wish to display on our records and resubmit.

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.

Rebekah White
Regulatory Specialist II Supervisor

Letter Number: 221A00005008

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: AllPac Worldwide, Inc.
Name of Corporation

DOCUMENT NUMBER: P17000035190

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:

Ms. Danielle Muren
Name of Contact Person
AllPac Worldwide, Inc.
Firm/Company
P. O. Box 1516
Address
Palatka, Florida. 32178
City/State and Zip Code

Sales@allpacworldwide.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Ms. Danielle Muren at (904) 982-7994
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
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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TALLAHASSEE, FL

**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: AllPac Worldwide, Inc.

2. The principal office address: 6549 Broadway Avenue, Jacksonville, Florida, 32154

3. The mailing address (if different): P. O. Box 1516, Palatka, Florida 32178

4. Date of incorporation/qualification: 04/18/2017 Document number: P17000035190

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)

Denise Barton

225 E. Robinson Street, Suite 570

Orlando, Florida, 32801

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

Mr. James Bledsoe, Bledsoe Jacobson Schmidt

501 Riverside Ave #903

Jacksonville, FL 32202

P.O. Box NOT acceptable

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.

Kathy Muren
Signature of an officer or director

Kathy Muren, 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.

Jan A. Bledsoe
Signature of Registered Agent

1/8/2021

Date

If signing on behalf of an entity:

Typed or Printed Name

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE

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TALLAHASSEE, FL