P11000045345

(1	Requestor's Name)	
(Address)	<u> </u>
(Address)	
	City/State/Zip/Phone #)	
PICK-UP	☐ WAIT	MAIL
	Business Entity Name)	
	Document Number)	
Certified Copies	Certificates of S	Status
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COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: Our House Of Sarasota County Inc

Name of Corporation

DOCUMENT NUMBER: P17000045345

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:

Terry J. Cheeseman

Name of Contact Person

Our House Of Sarasota County Inc

Firm/Company

6704 Neighborly Court

Address

North Port, Florida 34287

City/State and Zip Code

ourhouseofsarasotacountyinc@gmail.com

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

For further information concerning this matter, please call:

Terry J. Cheeseman

,856

404-2886

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 chai	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this age is submitted for a corporation organized under the laws of the State of Florida to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the	ne corporation: Our House Of Sarasota County Inc
2. The principal	office address: 6704 Neighborly Court
North Por	t, Florida 34287
	ddress (if different):
4. Date of incorp	oration/qualification: May 19, 2017 Document number: P17000045345
5. The name and Florida Depar	street address of the current registered agent and registered office on file with the tment of State: (If resigned, enter resigned)
	Terry J. Cheeseman
	180 Broadway, Apt 207
	Englewood, Florida 34223
6. The name and (if changed):	street address of the new registered agent (if changed) and /or registered office Terry J. Cheeseman
	Terry J. Cheeseman 22 2
	6704 Neighborly Court
	North Port, Florida 34287
The street addre	ess of its registered office and the street address of the business office of its registered agent, be identical.
Such change we	is authorized by resolution duly adopted by its board of directors or by an officer so board, or the corporation has been notified in writing of the change.
Terry	- Chusenan Terry J Cheeseman President Printed or typed name and title
I hereby accept I further agree performance of agent. Or, if th hereby confirm	the appointment as registered agent and agree to act in this capacity. To comply with the provisions of all statutes relative to the proper and complete my duties, and I am familiar with and accept the obligation of my position as registered is document is being filed merely to reflect a change in the registered office address, I that the corporation has been notified in writing of this change.
Jury	Sature of Registered Agent 9-19-18 Date
	half of an entity:
Terry	T. Cheese Manc

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