

P 18000 096 044

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

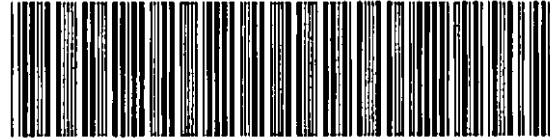
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

New Agent must sign.

Office Use Only



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SECRETARY OF STATE
20 FEB 18 PM 6:29
RECORDS

RA Change

FEB 18 2020

D CUSHING

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Donald Johnson, Inc.
Name of Corporation

DOCUMENT NUMBER: P18000096044

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:

Don Johnson

Name of Contact Person

Donald Johnson, Inc.

Firm/Company

601 Market Street # 470541

Address

Celebration, Florida 34747

City/State and Zip Code

dtheduffer@aol.com

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

For further information concerning this matter, please call:

Don Johnson

Name of Contact Person

at (727) 744-3106

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

RECEIVED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
20 FEB -6 PM 6:29



FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 14, 2020

DON JOHNSON
DONALD JOHNSON, INC.
601 MARKET STREET #470541
CELEBRATION, FL 34747

SUBJECT: DONALD JOHNSON INC.
Ref. Number: P18000096044

We have received your document for DONALD JOHNSON 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):

The New Registered Agent must sign the acceptance statement.

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.

Diane Cushing
Senior Section Administrator

Letter Number: 620A00000996

2020 FEB -6 AM 10:56

RECEIVED

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

1. The name of the corporation: Donald Johnson, Inc.
2. The principal office address: 601 MARKET STREET #470541
CELEBRATION, FLORIDA 34747
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 11/20/18 Document number: P18000096044

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)

LEGALINC CORPORATION SERVICES, INC.
5237 SUMMERLIN COMMONS, SUITE 400
FORT MYERS, FLORIDA 33907

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

Registered Agents Inc.

7901 4th St N STE 300

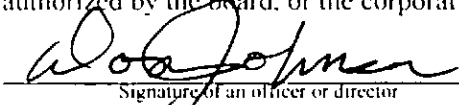
P.O. Box NOT acceptable

St. Petersburg FL 33702

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CLERK OF STATE
DIVISION OF CORPORATIONS
20 FEB -6 PM 6:29

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

DONALD JOHNSON, 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

1/30/2020
Date

If signing on behalf of an entity:

Bill Havre

Typed or Printed Name

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