## P1900000 3145

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## **COVER LETTER**

TO: Amendment Section Division of Corporations
SUBJECT: Camer Sund PA Name of Corporation
DOCUMENT NUMBER: P 19 0000 3145
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:
Name of Contact Person  Ward PA  Firm/Company  Address  VINCL 74293
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:    Area Code & Daytime Telephone Number   Area Code & Daytime Telephone Nu

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

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 \(1000000000000000000000000000000000000
in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: [amen Seward PA]
2. The principal office address: 13874 Van Can La Dy.
Vinice F1 34293
3. The mailing address (if different): 128 74 Vancanta Dt.
VINICE, F1 34293
4. Date of incorporation/qualification: 01 08 209 Document number: P1900003/49
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)
STPLM, HILLIN M
3930 State, Road U4 Fast
Bradentin, F1 34208
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
amen Sevard DA
13874 Valuata Dr. P.O. Box NOT acceptable
Venue F1 34293
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 of director United 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.
(Wing Stignature of Registered Agent 1-5-19 Date
If signing on behalf of an entity:
Typed or Printed Name

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