

P20 000092964

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

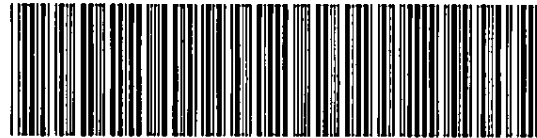
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



800368843048

06/23/21--01012--022 *495.00

FILED
2021 JUN 28 PM 1:12
TASSEE, FL

Rc/chg

JUL 13 2021

ALBRITTON

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Golden Pineapple Pet Care, P.A.
Name of Corporation

DOCUMENT NUMBER: P20000092964

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:

Steven D'Ambrose
Name of Contact Person

Golden Pineapple Pet Care
Firm/Company

13205 Reams Rd, suite 172
Address

Windermere, FL 34780
City/State and Zip Code

sped2385@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Steven D'Ambrose at (407) 765-0801
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

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

1. The name of the corporation: Golden Pineapple Pet Care, P.A.
2. The principal office address: 13205 Reams Rd, Suite 172
Windermere, FL 34786
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 11/23/2020 Document number: P20000092964
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)

D'Ambrose, Steven, DUM
7931 Lookout Pointe Dr.
Windermere, FL 34786

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

D'Ambrose, Steven, DUM
13205 Reams Rd, Suite 172
P.O. Box NOT acceptable
Windermere, FL 34786

FILED
2021 JUN 28 PM 1:12

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]
Signature of an officer or director

Steven D'Ambrose, 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]
Signature of Registered Agent

6/22/21
Date

If signing on behalf of an entity:

Steven D'Ambrose
Typed or Printed Name

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE