## P21000049403

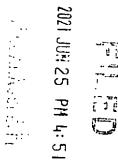
(Requestor's Name)				
(requestors marrie)				
(Address)				
, ,				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP	☐ WAIT	MAIL		
(Bu	isiness Entity Nar	ne)		
	<del></del>	· <u></u>		
(Do	ocument Number)			
Certified Copies	Certificates	s of Status		
Special Instructions to	Filing Officer			
Special modulations to	Tilling Cirioci.			

Office Use Only



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KAIRCICH8

JUL 22 2021 LALBRITTON

## **COVER LETTER**

то:	Amendment Section Division of Corporations	
SUBJI Name	ECT: Blueside Properties, Inc. of Corporation	
DOCU	JMENT NUMBER: P21000049403	
The en	iclosed Statement of Change of Registered	Office/Agent and fee are submitted for filing.
	return all correspondence concerning this	
	l Colburn of Contact Person	
•	of Contact Person ; Weidenmiller, Michetti & Rudnick, LLP	
	Company	<del></del>
	trada Stell Court, Suite 400	
Addres	SS	
Naples	i, FL 34109	
City/S	tate and Zip Code	
	sue@suemyhelic.com	
E-mai	l address: (to be used for future annual	report notification)
For fu	rther information concerning this matter. p	please call:
Samue	l Colburn	at (239 ) 325-4070  Area Code & Daytime Telephone Number
	Name of Contact Person	Area Code & Daytime Telephone Number
Enclos	sed is a \$35.00 check made payable to the	Department of State.
	Mailing Address: Amendment Section Division of Corporations	Street Address: Amendment Section Division of Corporations

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

CR2E045 (04/13)

P.O. Box 6327

Tallahassee, FL 32314

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	provisions of sections 607.0502, 617 nge is submitted for a corporation of r to change its registered office or re	rganized under the laws of the S	State of Florida
1 The	he corporation: Blueside Properties,	Inc.	
2. The principal	office address: 375 Green Rd Stoney	Creek, ON L8E 4A5, Canada	
3. The mailing a	ddress (if different):		
4. Date of incorporation/qualification: 5/24/2021 Document number: P210000			
5. The name and Florida Depar	I street address of the current register timent of State: (If resigned, enter res	red agent and registered office c signed)	
	STEPHEN MASON		2021
	27241 HIGH SEA LN		
	BONITA SPRINGS, FL 34135		25 P
6. The name and (if changed):	l street address of the new registered	agent (if changed) and /or regis	2021 July 25 PM 4: 51 stered office
	Sue Myhelic		
	7742 ALICO RD		
P.O. Box NOT acceptable			
	FORT MYERS, FL, 33912		<del></del>
The street address changed will	ess of its registered office and the st be identical.	reet address of the business of	fice of its registered agent.
Such change wa authorized by th	as authorized by resolution duly add ne board, or the corporation has bee	opted by its board of directors in notified in writing of the cha	or by an officer so inge.
Stephen Mason		Stephen Mason	
Signatu	re of an officer or director	Printed or typed	name and title
I furthér agrée ( of my duties, an Jociment is bei	the appointment as registered agents comply with the provisions of all d I am familiar with and accept the ng filed merely to reflect a change s been notified in writing of this cha	statutes relative to the proper obligation of my position as t in the revistered office addres:	acity. and complete performance egistered agent. Or, if this s. I hereby confirm that the
See mylectic		6/21/2021	
Sig	nature of Registered Agent	Date	:
If signing on be	half of an entity:		
<u>-</u>	yped or Printed Name		

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