

P21000060560

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

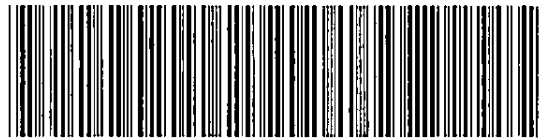
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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Office Use Only



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07/28/25--01030--004 **35.00

S. CHATHAM

AUG 23/2025 AM

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FILED
2025 AUG 18 PM 2:41
CLERK OF SUPERIOR COURT
JULIA H. SOBEL, JR.



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 3, 2025

SANDRA WEAVER
3779 ACLINE RD, #B4
PUNTA GORDA, FL 33950 US

SUBJECT: TALL PINES TACKLE, INC.
Ref. Number: P21000060560

We have received your document for 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 registered agent must sign accepting the designation.

The document must be signed by a chairman, vice chairman, director, officer, or an incorporator, if directors or officers have not been selected.

If you have any further questions concerning your document, please call (850) 245-6050.

Summer Chatham
Supervisor
Amendment Section

Letter Number: 025A00017116

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

1. The name of the corporation: TALL PINES TACKLE INC
2. The principal office address: 3779 ACLINE ROAD # B4 PUNTA GORDA, FL 33950

3. The mailing address (if different): _____

4. Date of incorporation/qualification: 06/24/2021 Document number: P21000060560

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)

RESIGNED

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

SANDRA WEAVER

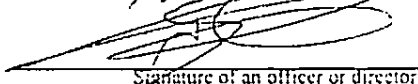
3779 ACLINE ROAD #B4

P.O. Box NOT acceptable

PUNTA GORDA, FL 33950

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

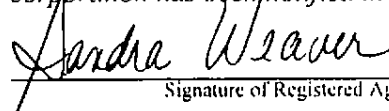
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.


Signature of an officer or director

BARRY KEAST 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

04/07/2025

Date

If signing on behalf of an entity:

TALL PINES TACKLE INC

Typed or Printed Name

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

CR2E045 (04/13)

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