

P21000079590

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

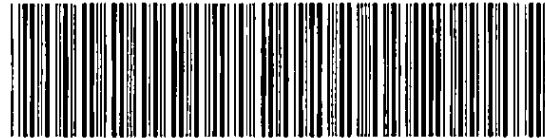
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What Instructions to Filing Officer:

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FILED  
2023 FEB 20 AM 8:10

RECEIVED  
2023 FEB 16 AM 11:21  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

A. RAMSEY

FEB 21 2023

\*62250.00709 00471

CORPORATION SERVICE COMPANY  
1201 Hays Street  
Tallahassee, FL 32301  
Phone: 850-558-1500

ACCOUNT NO. : I200000000195

REFERENCE : 502059 8405886

AUTHORIZATION :

COST LIMIT ~~\$35.00~~ *Eylien Baker*

ORDER DATE : February 15, 2023

ORDER TIME : 9:21 AM

ORDER NO. : 502059-005

CUSTOMER NO: 8405886

CHANGE OF AGENT

NAME: SQUIRREL CONSULTING INC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

       CERTIFIED COPY  
XX        PLAIN STAMPED COPY

CONTACT PERSON: Eyliena Baker -- EXT#

EXAMINER: \_\_\_\_\_



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

February 17, 2023

CORPORATION SERVICE COMPANY

TALLAHASSEE, FL 32301

SUBJECT: SQUIRREL CONSULTING INC.  
Ref. Number: P21000079590

**RESUBMIT**

Please give original  
submission date as file date.

We have received your document for SQUIRREL CONSULTING INC. and the authorization to debit your account in the amount of \$35.00. However, the document has not been filed and is being returned for the following:

We are enclosing a computer printout which reflects the registered agent and registered office now on file with this office. Please amend your document accordingly.

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) 245-6823.

Annette Ramsey  
OPS

Letter Number: 323A00003897

RECEIVED  
2023 FEB 20 AM 11:25  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Squirrel Consulting Inc.  
Name of Corporation

**DOCUMENT NUMBER:** P21000079590

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:

Mark Wollschleger

Name of Contact Person

Squirrel Consulting Inc.

Firm/Company

1635 Commons Parkway

Address

Macedon, NY 14502

City/State and Zip Code

mwollschleger@izzo.com

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

For further information concerning this matter, please call:

Mark Wollschleger

Name of Contact Person

at (315)

538-9126

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

1. The name of the corporation: Squirrel Consulting Inc.
2. The principal office address: 16395 Brookfield Estates Way  
Delray Beach, FL 33446
3. The mailing address (if different): \_\_\_\_\_
4. Date of incorporation/qualification: 4/15/2022 Document number: P21000079590
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)

Wendy Dan

16395 Brookfield Estates Way

Delray Beach

FL 33446

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

Corporation Service Company

1201 Hays Street

P.O. Box NOT acceptable

Tallahassee

FL 32301

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.

Mark Wollschleger  
Signature of an officer or director

Mark Wollschleger

2/13/2023

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.*

Corporation Service Company

By: [Signature]  
Signature of Registered Agent

2/13/2023

Date

If signing on behalf of an entity:

\_\_\_\_\_  
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)