

P22 000005589

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*[Handwritten signature]*



FLORIDA DEPARTMENT OF STATE <sup>2022 DEC 19 PM 3:42</sup>  
Division of Corporations

December 7, 2022

SOUTHRIDE SHOPPES (US), INC.  
C/O EQUITY INVESTMENT SERVICES  
7575 DR. PHILLIPS BLVD, SUITE 390  
ORLANDO, FL 32819

SUBJECT: SOUTHRIDGE SHOPPES (US), INC.  
Ref. Number: P22000005589

We received this check with no attachments. To prevent delays in filing and improper application of fees, please return the check together with the appropriate document for processing.

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) 245-6050.

Tammi Cline  
Regulatory Specialist II Supervisor

Letter Number: 422A00027095

*See attached*

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## COVER LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: SOUTHRIDGE SHOPPES (US), INC.  
Name of Corporation

DOCUMENT NUMBER: P22000005589

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:

Kevin B. Logue  
Name of Contact Person  
Equity Investment Services, LLC  
Firm/Company  
7575 Dr. Phillips Blvd., Suite 390  
Address  
Orlando, FL 32819  
City/State and Zip Code

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

For further information concerning this matter, please call:

Kevin B. Logue at (407) 573-0711 ext. 308  
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 Florida in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: SOUTHRIDGE SHOPPES (USA) INC.
2. The principal office address: 12 AMES CRESCENT AURORA, ON L4G 0-C3 CA
3. The mailing address (if different): \_\_\_\_\_
4. Date of incorporation/qualification: 01/13/2022 Document number: P22000005589
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)

HOLD-THYSSEN, LLC

301 SOUTH NEW YORK AVE, SUITE 200

WINTER PARK, FL 32789

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

Kevin B. Logue

Equity Investment Services, LLC

P.O. Box NOT acceptable

7575 Dr. Phillips Blvd., Suite 390, Orlando, FL 32819

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

Stephen Briggs, 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

11/29/2022  
Date

If signing on behalf of an entity:

Kevin B. Logue

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

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