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## **COVER LETTER**

Division of Corporations
SUBJECT: ERVAL. JOANE, TNC. Name of Corporation
DOCUMENT NUMBER: P9300035246
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:
Name of Contact Person  TREE ART Firm/Company  3310 Loleland Blvd # 1704  Address  Pura Gorda F 33980  City/State and Zip Code  Tree art Jeff a grant Com  E-mail address: (to be used for future annual) report notification)
For further information concerning this matter, please call:    ERV DCANE   at (CHI) 249 7575     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 Clifton Building 2661 Executive Center Circle

Tallahassee, FL 32301

TO:

Amendment Section

## 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 $\frac{1}{10000000000000000000000000000000000$
in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: ERVA L. JOANE, INC.
2. The principal office address: 1111 Wears Valley Rd.
Pigeon Forge. TN 37863
3. The mailing address (if different): Pc Bx 803
Pigeon Force TN 37868
4. Date of incorporation/qualification: 51393 Document number: P93000035246
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)
ERY DOANE (resigning 12/31/20)
3310 Loveland Blue # 1704
Pyrra Gorda Fr 33980 =
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Punta Gorda, FC 33980
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  Edva L. Dodn'E, Residence  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  Date
If signing on behalf of an entity:
Typed or Printed Name

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

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