794000030639

(Requestor's Name)		
(Address)		
(Address)		
,		
(City/State/Zip/Phone #)		
(Only/Oracio/Zip/) Hone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
Certified Copies Certificates of Status		
Certified copies Certificates of Status		
Special Instructions to Filing Officer:		





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2020 SEP -4 AMIO: 12

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COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: Windsor Partners, Inc. Name of Corporation	
DOCUMENT NUMBER: P94000030639	
The enclosed Statement of Change of Registered	d Office/Agent and fee are submitted for filing.
Please return all correspondence concerning this	s matter to the following:
Jane A. Ford Name of Contact Person	
Torwest, Inc. Firm/Company	
3125 Windsor Boulevard	
Address	
Vero Beach, FL 32963	
City/State and Zip Code	
Jane.Ford@winds	orflorida.com
E-mail address: (to be used for future annua	l report notification)
For further information concerning this matter, [please call:
Jane A. Ford Name of Contact Person	at (<u>772</u>) <u>388-8388</u> Area Code & Daytime Telephone Number
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	Street Address:
	Amendment Section
Division of Corporations P.O. Box 6327	Division of Corporations The Centre of Tallahassee
Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810
rananassee, Ft. 52514	Tallahassee, FL 32303

CR2E045 (04/13)

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

statement of change is submitted for a corporat	2, 617.0502, 607.1508, or 617.1508, Florida Statutes ion organized under the laws of the State of <u>Florid</u> or registered agent, or both, in the State of Florida.	la
I. The name of the corporation: Windsor Pa	rtners, Inc.	
2. The principal office address: 3125 Windso	or Blvd., Vero Beach, FL 32963	
3. The mailing address (if different):		
4. Date of incorporation/qualification: <u>4/21/1</u>	994 Document number: P940000306	539
5. The name and street address of the current re Florida Department of State: (If resigned, ent	gistered agent and registered office on file with the ter resigned)	
Jerome D. Quinn, Esqu	tire (RESIGNED 8/15/2020)	
3111 Cardinal Drive		202
Vero Beach, FL 32963		020 SEP
6. The name and street address of the new regis (if changed):	ntered agent (if changed) and /or registered office signal of the second stered agent (if changed) and /or registered office signal of the second signal of	- L - L
Bruce Barkett, Esquire	CL1	<u> </u>
756 Beachland Boulve	d. PO Box NOT acceptable	72
Vero Beach, FL 3296	·	
The street address of its registered office and as changed will be identical.	the street address of the business office of its regist	tered agent.
Such change was authorized by resolution dul authorized by the board, or the corporation ha	ly adopted by its board of directors or by an officer is been notified in writing of the change.	: so
Signature of an officer of director	Jane A. Ford, Vice President Printed or typed name and title	
I hereby accept the appointment as registered I further agree to comply with the provisions of of my duties, and I am familiar with and accep document is being filed merely to reflect a cho corporation has been notified in writing of thi	agent and agree to act in this capacity. of all statutes relative to the proper and complete to the obligation of my position as registered agent ange in the registered office address, I hereby conf. is change	performance t. Or, if this irm that the
Que Calle	8/13/ 3020	
Signature of Registered Agent If signing on behalf of an entity:	i Date	
Typed or Printed Name	_	
* * * F[LING FEE: \$35.00 * * *	

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