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SECRETARY OF STATE TALLAHASSEE, FLORIDA

204/16

COVER LETTER

Amendment Section Division of Corporations

TO:

SUBJECT: TIGGR LILY CORPOR Name of C	Corporation
DOCUMENT NUMBER: P9800066	<i>5893</i>
The enclosed Statement of Change of Registered Office	ce/Agent and fee are submitted for filing.
Please return all correspondence concerning this matter	er to the following:
WENDY NEWYER Name of Co	N entact Person
TIGER LILY Firm/C	CURPORATION Ompany
ZON RANCH ES	TATE DRIVE
ORLANDO, FL 3: City/State a	≥&2-5 nd Zip Code
E-mail address: (to be used for t	(.c', C', C', C', C', C', C', C', C', C', C
For further information concerning this matter, please	call:
Name of Contact Person	at (A07) 616-4690 Area Code & Daytime Telephone Number
Enclosed is a \$35.00 check made payable to the Depar	tment of State.
Mailing Address: Amendment Section Division of Corporations	Street Address: Amendment Section Division of Corporations
P.O. Box 6327	Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301

Tallahassee, FL 32314

STÄTEMENT 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.	
1. The name of the corporation: TIGER LILY COLPORATION	
2. The principal office address: 7624 DEBEAUBIEN DRIVE	
ORLANDO, FL 32835	
3. The mailing address (if different):	
4. Date of incorporation/qualification \$7/69/1998 Document number: P9\$ φφφ 6Φ89	93
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)	
THERESE H. THOMPSON	
7624 DEBEAUDIEN PRIVE	
GeLANDO, FL 3≥835 _ >	<u>ا</u> ل
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):	ECRETA
MENDY PENTEN	
P.O. Box NOT acceptable	F STATI
ORVANDO, FL 32825	>
The street address of its registered office and the street address of the business office of its registered ag as changed will be identical.	ent,
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 tirector Chycles D. Thompson, Ressignment of the Signature of an officer or tirector 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 4/6/2015 Date	
If signing on behalf of an entity:	
WENDY NGUYEN 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 * * *