

711372

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP

WAIT

MAIL

(Business Entity Name)

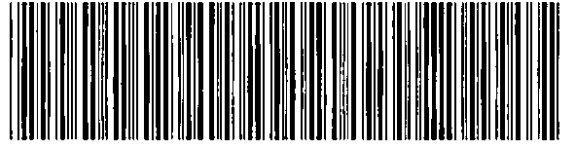
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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Chancellor Hall Association, Inc.
Name of Corporation

DOCUMENT NUMBER: 711372

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:

Steven S. Valancy

Name of Contact Person

Valancy & Reed, P.A.

Firm/Company

310 SE 13 Street

Address

Ft. Lauderdale, Florida 33316

City/State and Zip Code

general@myflalaw.com

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

For further information concerning this matter, please call:

Steven S. Valancy

Name of Contact Person

at (954) 463-1600

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

STATE OF FLORIDA
DIVISION OF CORPORATIONS

1. Name of the corporation: _____
2. Date of incorporation: 08/16/2023
3. The name and street address of the corporation's principal office on file with the Florida Department of State: 3109 S.W. 202 Fort Lauderdale, FL 33331
4. The name and street address of the corporation's principal office: _____

5. Date of incorporation: 08/16/2023
6. The name and street address of the corporation's principal office on file with the Florida Department of State: 3109 S.W. 202 Fort Lauderdale, FL 33331
7. The name and street address of the corporation's principal office: _____

8. The name and street address of the corporation's principal office: _____
9. The name and street address of the corporation's principal office: _____

10. The name and street address of the corporation's principal office: _____

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15. The name and street address of the corporation's principal office: _____

16. The name and street address of the corporation's principal office: _____

17. The name and street address of the corporation's principal office: _____

18. The name and street address of the corporation's principal office: _____

19. The name and street address of the corporation's principal office: _____

20. The name and street address of the corporation's principal office: _____

23 SEP 25 AM 10:23
RECEIVED
CORPORATIONS
DIVISION OF CORPORATIONS

[Handwritten signature]
[Handwritten signature]

GRACE M. ALCANTARA
Printed or typed name of officer

and agree to act in this capacity
relative to the proper and
and accept the obligation of my
to reflect a change in the registered
notified in writing of that change

09 20 2023

FILED
MAKE CHECKS PAYABLE TO FLORIDA
MALETO: DIVISION OF CORPORATIONS, FLORIDA
CR2/043 (03/12)