727218

(Requestor's Name)					
(Address)					
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SECRETARY OF STATEMENT OF STATE

C.COULLIETTE OCT 19 2009

EXAMINER



CT 1203 Governors Square Blvd. Tallahassee, Fl. 32301-2960 850 222 1092 tel 850 222 7615 fax www.ctlegalsolutions.com

October 15, 2009

Department of State, Florida Clifton Building 2611 Executive Center Circle Tallahassee FL 32301

Re: Order #: 7677654 SO

Customer Reference 1: COA

Customer Reference 1. CON

Customer Reference 2: None Given

Dear Department of State, Florida:

Please obtain the following:

Arcadia Lodge No. 1327, Loyal Order of Moose, Inc. (FL) Change of Agent Florida

Enclosed please find a check for the requisite fees. Please return document(s) to the attention of the undersigned.

If for any reason the enclosed cannot be processed upon receipt, please contact the undersigned immediately at (850) 222-1092. Thank you very much for your help.

Sincerely,

Freddy Morales Corporate Operations Mgr. freddy.morales@wolterskluwer.com

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

-			607.1508, or 617.1508, Florid ed under the laws of the State (_
in orde	r to change its registered	office or registere	ed agent, or both, in the State o		
1. The name of t	he corporation: Arcadia Lo	odge No. 1327, Lo	yal Order Of Moose, Inc.		<u></u>
1121 W. OAI	ST. ARCADIA FL 34266				
3. The mailing a	ddress (if different):				
4. Date of incorp	oration/qualification:	08/21/73	Document number:	727218	
	I street address of the curre tment of State: (If resigned		nt and registered office on file	with the	
	CORPORATION SERVICE	CE COMPANY			
	1201 HAYS STREET TALLAHASSEE FL 32301				
				7	
6. The name and (if changed):	street address of the new	registered agent ((if changed) and /or registered	09 0CT 15	or has
	C T Corporation System				print.
	c/o C T Corporation System, 1200 South Pine Island Road			PH 12:	
	Disease Florida 22204	P.O. Box NOT a	·	2: 0 0 : 3	
	Plantation, Florida 33324				
The street addre as changed will	ess of its registered office be identical.	and the street ad	dress of the business office of	of its registered age	nt,
Such change wa authorized by th	is authorized by resolution board, or the corporation	n duly adopted bon has been notif	y its board of directors or by fied in writing of the change.	an officer so	
1	/h/		Kimberly Breunling, V	ice President	
_	e of an officer or director		Printed or typed name ar		-
I hereby accept I further agree t of my duties, an document is bei corporation has	the appointment as regis to comply with the provisi d I am familiar with and ng filed merely to reflect been notified in writing	tered agent and a ions of all statute accept the oblige a change in the r of this change.	agree to act in this capacity. es relative to the proper and a ation of my position as regist registered office address, I he	complete performar ered agent. Or, if t ereby confirm that t	ıce his he
By: CT Corporation System 10/15/09					
Sign	nature of Registered Agent th Assistant Secreta:	rv	Date		-
	half of an entity:	- 1			
Ty	vped 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 * * *

CR2E045 (8/05)