

853688

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



700251471367

09/09/13--01044--026 **35.00

FILED
13 SEP -9 AM 11:49
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

B Teflock SEP 10 2013

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: **EDM OF ORLANDO, INC.**

Name of Corporation

DOCUMENT NUMBER: **853688**

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:

Denise Fowler

Name of Contact Person

Registered Agents Legal Services

Firm/Company

1220 N Market Street, #806

Address

Wilmington, DE 19801

City/State and Zip Code

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

For further information concerning this matter, please call:

Denise Fowler

Name of Contact Person

at **800 400-6650**

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

**STATEMENT 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 MO _____ in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: EDM OF ORLANDO, INC.
2. The principal office address: 220 Mansion House, 3rd Floor, St. Louis, MO 63102
3. The mailing address (if different): _____

4. Date of incorporation/qualification: 08/09/1982 Document number: 853688

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)

Registered Agents Legal Services, Inc.

155 Office Plaza Drive, Suite A

Tallahassee, FL 32301

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Registered Agents Legal Services, LLC

155 Office Plaza Drive, Suite A

P.O. Box NOT acceptable

Tallahassee, FL 32301

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.

Steven M. Skasick
Signature of an officer or director

Steven M. Skasick Exec. VP
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.

Denise Fowler
Signature of Registered Agent

9.3.13
Date

If signing on behalf of an entity:

Denise Fowler
Typed or Printed Name

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

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

CR2E045 (03/12)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

13 SEP -9 AM 11:49

FILED