F03000006226

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COVER LETTER

TO:

Amendment Section Division of Corporations

SUBJECT: Compassion & Choices (Incorporated)	
Name of Corporation	
DOCUMENT NUMBER: F03000006226	<u></u>
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:
Kevin Kennedy	
Name of Contact Person	
3H Corporate Services, Inc.	
Firm/Company	
36 Long Alley	
Address	
Saratoga Springs, NY 12866	
City/State and Zip Code	
sosfilings@3hcs.com	
E-mail address: (to be used for future annua	l report notification)
For further information concerning this matter, p	olease call:
Kevin Kennedy	at (518) 583-0639 Ext. 133 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
Amendment Section Division of Corporations	Amendment Section Division of Corporations
P.O. Box 6327	The Centre of Tallahassee
Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

CR2E045 (04/13)

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

statement of cha	nge is submitted for a corporation	17.0502, 607.1508, or 617.1508, Florida 8 is organized under the laws of the State of $\frac{C}{2}$ registered agent, or both, in the State of F	Colorado
1. The name of t	he corporation: Compassion & Ch	oices (Incorporated)	
2. The principal	office address: 8156 S Wadsworth	Blvd E-162 Littleton, CO 80128	
3. The mailing a	ddress (if different):	<u></u>	
4. Date of incorp	poration/qualification: 12/15/2003	Document number: F0300000	06226
	I street address of the current regis tment of State: (If resigned, enter	stered agent and registered office on file wiresigned)	ith the
	3H Agent Services, Inc.		_
	1415 Panther Lane, Suite 327		202
	Naples, FL 34109		E SEGNETA SEGNETA SEGNETA
6. The name and (if changed):	I street address of the new register	ed agent (if changed) and /or registered of	fice &
	3H Agent Services, Inc.	<u> </u>	ED 814.
	2114 NW 40th Terrace, Suite D2		ਂ ਨੂੰ
		P.O. Box NOT acceptable	-
	Gainesville, FL 32605		-
		street address of the business office of it	
Such change wa	as authorized by resolution duly a ne board, or the corporation has b	adopted by its board of directors or by an een notified in writing of the change.	officer so
(nust	al Huisle	Crystal Huish, Chief Find	ancial Officer
Signal	E-19 CHAPTICET OF DIRECTOR	Printed or typed name and ti	tle
I further agrée a of my duties, an document is bei	to cominly with the provisions of i	gent and agree to act in this capacity. all statutes relative to the proper and con the obligation of my position as registered ge in the registered office address, I herel change.	aplete performanc d agent. Or, if thi by confirm that the
tall !	W_1	4/29/2024	
Sig	nature of Registered Agent	Date	
If signing on be	half of an entity:		
Darrell Belch, A	sst. Sec., 3H Agent Services, Inc.	_	
Т	yped 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 * * *