

**F 0800004648**

7/15/2013 9:52 AM From: Tab 8506176380 (1/4)  
 Division of Corporations Page 1 of 1

Florida Department of State  
 Division of Corporations  
 Electronic Filing Cover Sheet

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**\*RE-SUBMIT\***

To: Division of Corporations  
 Fax Number : (850)617-6380

From: Account Name : C T CORPORATION SYSTEM  
 Account Number : FCA000000023  
 Phone : (850)222-1092  
 Fax Number : (850)878-5368

Please retain original filing date of submission 7/12

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address: \_\_\_\_\_

REGISTERED AGENT CHANGE  
 CLARITY SERVICES, INC.

*R. White*  
**JUL 16 2013**  
 R. WHITE

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$35.00

SECRETARY OF STATE  
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July 15, 2013

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

CLARITY SERVICES, INC.  
311 PARK PLAZA BLVD., SUITE 330  
CLEARWATER, FL 33759

SUBJECT: CLARITY SERVICES, INC.  
REF: F08000004648

**\*RE-SUBMIT\***

Please retain original filing  
date of submission 7/12

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refile the complete document, including the electronic filing cover sheet.

The current name of the entity is as referenced above. Please correct your document accordingly.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Rebekah White  
Regulatory Specialist II

FAX Aud. #: H13000156576  
Letter Number: 013A00017142

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13 JUL 15 AM 8:32

DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

P.O. BOX 6327 - Tallahassee, Florida 32314

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** CLARITY SERVICES, INC.  
Name of Corporation

**DOCUMENT NUMBER:** F08000004648

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:

Name of Contact Person

CT Corporation System

Firm/Company

1200 South Pine Island Road

Address

Plantation, Florida 33324

City/State and Zip Code

CT-statecommunications@wolterskluwer.com

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

For further information concerning this matter, please call:

Angela Lamaruggins at ( 855 316-8944 )  
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  
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 Delaware in order to change its registered office or registered agent, or both, in the State of Florida.

- 1. The name of the corporation: CLARITY-SERVIGES, INC.
- 2. The principal office address: 15550 Lightwave Dr 350 CLEARWATER, FL 33760
- 3. The mailing address (if different): \_\_\_\_\_
- 4. Date of incorporation/qualification: 10/27/2008 Document number: F08000004648
- 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)

LORRAINE E ANSLEY  
15550 Lightwave Dr 350 CLEARWATER, FL 33760

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

CT Corporation System  
c/o C T Corporation System, 1200 South Pine Island Road  
Plantation, Florida 33324  
P.O. Box NOT acceptable

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 TALLAHASSEE, FLORIDA

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.

[Signature]  
 Signature of an officer or director

Thomas Chadwick, CEO  
 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.*

By: [Signature]  
 Signature of Registered Agent

6/6/2013  
 Date

If signing on behalf of an entity:

Sierra Burts  
Vice President & Assistant Secretary  
 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)