

F09000003777

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

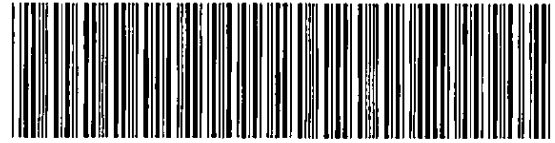
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Certified Copies _____ Certificates of Status _____

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FILED
2024 MAY 20 AM 10:26

RECEIVED
2024 MAY 20 PM 3:37
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 465323 7947773

AUTHORIZATION

COST LIMIT

[Handwritten Signature]
\$ 35.00

ORDER DATE : May 10, 2024

ORDER TIME : 2:21 PM

ORDER NO. : 465323-006

CUSTOMER NO: 7947773

CHANGE OF AGENT

NAME: LEGACYTREE FOUNDATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_____ CERTIFIED COPY
XX _____ PLAIN STAMPED COPY

CONTACT PERSON: Amanda Miller

EXAMINER'S INITIALS: _____

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 OK in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: LEGACYTREE FOUNDATION, INCORPORATED

2. The principal office address: _____
3517 Kedron Road Spring Hill, TN 37174

3. The mailing address (if different): _____

4. Date of incorporation/qualification: 09/21/2009 Document number: F09000003777

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 AGENT SOLUTIONS, INC.
2894 REMINGTON GREEN LANE SUITE A
TALLAHASSEE, FL 32308

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Corporation Service Company
1201 Hays Street
Tallahassee FL 32301
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.

/s/Nanette Beebe
Signature of an officer or director

Nanette Beebe Treasurer
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.

Corporation Service Company
By: Grace E. Kirby
Signature of Registered Agent

05/09/2024
Date

If signing on behalf of an entity:
Grace E. Kirby, Asst Vice President
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 (04/13)

CSC 465323 006