## N14864

(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
(City) citate Lips (Total II)					
PICK-UP WAIT MAIL					
-					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					

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**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 #: 7677194 SO

Customer Reference 1: COA

Customer Reference 2: None Given

Dear Department of State, Florida:

Please obtain the following:

Golden Gate Lodge No. 1654 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

statement of cha	unge is submitted for a corp er to change its registered (	poration organiz office or register	, 607.1508, or 617.1508, Flori ted under the laws of the State red agent, or both, in the State	of Florida
1. The name of	the corporation: Golden Ga	te Lodge No. 165	34 Loyal Order Of Moose, Inc.	
2. The principal				
•	address (if different):990081 NAPLES FL 33999			
4. Date of incor	poration/qualification:	09/18/78	Document number:	N14864
	d street address of the curre rtment of State: (If resigner		ent and registered office on file )	e with the
	CORPORATION SERVICE	CE COMPANY		
	1201 HAYS STREET TA	LLAHASSEE FI	. 32301	
				SEC TALLE
6. The name and (if changed):	d street address of the new	registered agent	(if changed) and /or registered	roffice 15
	C T Corporation System			
	c/o C T Corporation System	m, 1200 South Pi	ne Island Road	
		P.O. Box NOT	acceptable	
	Plantation, Florida 33324			—————————————————————————————————————
The street addr as changed will	ess of its registered office l be identical.	and the street a	ddress of the business office	of its registered agent,
Such change wauthorized by	as authorized by resolution he board, or the corporation	on duly adopted on has been not	by its board of directors or b ified in writing of the change	y an officer so
	1/2/	$\overline{}$	Kimberly Breunling,	
I hereby accept I further agree of my duties, an document is be corporation ha	to comply with the provis ad I am familiar with and ing filed merely to reflect s been notified in writing	ions of all statu accept the oblig a change in the	Printed or typed name l agree to act in this capacity tes relative to the proper and gation of my position as regis registered office address, I h	complete performance tered agent. Or, if this
By: Revices Bath 10/15/0			)	
Rebecca Ba	nature of Registered Agent rth Assistant Secreta chalf of an entity:	ry	Date	
	yped 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 (8/05)