

Division of Corporations **Electronic Filing Cover Sheet**

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H170002417503)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : REGISTERED AGENTS INC.

Account Number : 120090000081 Phone : (307)200-2803 Fax Number : (855)330-1010

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

Email Address:_

REGISTERED AGENT CHANGE MAGA COALITION INCORPORATED

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$35.00

Electronic Filing Menu — Corporate Filing Menu

Help

C. GOLDEN

SEP 1 4 2017

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

1. The name of t	he corporation: MAGA COALITION	INCORPORATED		
2. The principal	office address: 3 EASTWINDS CIRCL	<u>E</u>		
TEQUESTA,				
3. The mailing a	ddress (if different):			
4. Date of incom	poration/qualification: 08/15/2017	Document number: N17000008411		
5. The name and		ed agent and registered office on file with the	V. 27	20
	KRUEGER, JOHN			2017 S
	3 EASTWINDS CIRCLE		2	SEP I
	TEQUESTA, FL 33469		(5) [7]	$\overline{\omega}$
6. The name an (if changed):		agent (if changed) and for registered office	TLOR!	AM 9: 3
	Registered Agents Inc.		25,	=
	3030 N. Rocky Point Dr. ST	E 150A		
		NOT acceptable		
	Tampa FL 33607			
The street addr	ress of its registered office and the still be identical.	reet address of the business office of its registe	ered agent,	
Such change w	ras authorized by resolution duly ado the board, or the corporation has been	pted by its board of directors or by an officer s a notified in writing of the change.	50	
ZU	M	Glenn Herman, Vice President		
	ure of an officer of director	Hinted or typed name and title		
I hereby accep I further agree perfont. Or, if the hereby confirm	it the appointment as registered agen to comply with the provisions of all if my duties, and I am familiar with a this document is being filed merely to In that the corporation has been notifi	t and agree to act in this capacity. statutes relative to the proper and complete nd accept the obligation of my position as reg- reflect a change in the registered office addre- ied in writing of this change.	istered :ss, [
But	<u></u>	09/12/17		
S	ignature of Registered Agent	Cate		
If signing on t	ehalf of an entity:			
Bill Havre				

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

MAKE CHECKS PAYABLE TO PLOPIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2EC45 (03/12)

FILEU