705860

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





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USUN TARY OF STATE OR ATTOMS

Ra Change

AUG 2 7 2019

D CUSHING

COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: United Way of Lee County, Inc.

Name of Corporation

DOCUMENT NUMBER, 705860

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:

Jeannine M. Joy

Name of Contact Person

United Way of Lee County, Inc.

Firm/Company

7273 Concourse Dr.

Address

Fort Myers, FL 33908

City/State and Zip Code

mike@unitewaylee.org

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

For further information concerning this matter, please call:

Michael Willis

,,239 \43

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

statement of ch	e provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, the same submitted for a corporation organized under the laws of the State of Florida ler to change its registered office or registered agent, or both, in the State of Florida.	is 	
	the corporation: United Way of Lee County, Inc.		
2. The principa	office address: 7273 Concourse Dr., Fort Myers, FL 33908		
3. The mailing	address (if different):		
4. Date of incom	rporation/qualification: 07/08/1963 Document number: 705860		-
	d street address of the current registered agent and registered office on file with the irtment of State: (If resigned, enter resigned)		
	Clifford W. Smith		
	7273 Concourse Dr.		
	Fort Myers, FL 33908		
6. The name an (if changed):	d street address of the new registered agent (if changed) and /or registered office	130	151A 2175
	Jeannine M. Joy	ALIS	2E 2E
	7273 Concourse Dr.	ū	03 s
	P.O. Box NOT acceptable Fort Myers, FL 33908	2 Hd	- 유유 - 공유
	ess of its registered office and the street address of the business office of its registered be identical.	?: 30 l agent	TATE
Such change wanthorized by t	as authorized by resolution duly adopted by its board of directors or by an officer so he board, or the corporation has been notified in writing of the change.		
Milly	Mary Vlasak Snell, Secretary Printed or typed marne and title		
I hereby accept I further hyree performance of agent. Or, if the hereby confirm	the appointment as registered agent and agree to act in this capacity, to comply with the provisions of all statutes relative to the proper and complete my duties, and I am familiar with and accept the obligation of my position as registe his document is being filed merely to reflect a change in the registered office address, that the corporation has been notified in writing of this change.	red I	
Jan. Sign	anature of Registered Agent Date		
If signing on be	chalf of an entity:		
Jeannine N			
1	Typed or Printed Name		

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