

708195

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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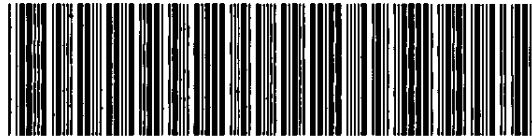
(Business Entity Name)

(Document Number)

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TALLAHASSEE FLORIDA

*R. White*  
APR 22 2016  
R. WHITE

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Nova Southeastern University  
Name of Corporation

**DOCUMENT NUMBER:** 708195

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:

Thomas F. Panza, Esq.

Name of Contact Person

Panza, Maurer & Maynard, P.A.

Firm/Company

2400 East Commercial Boulevard, Suite 905

Address

Fort Lauderdale, FL 33308

City/State and Zip Code

Tpanza@panzamaurer.com

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

For further information concerning this matter, please call:

Thomas F. Panza, Esq.

Name of Contact Person

at ( 954 ) 390.0100

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

1. The name of the corporation: Nova Southeastern University
2. The principal office address: 3301 College Avenue, Fort Lauderdale, FL 33314
3. The mailing address (if different): Same
4. Date of incorporation/qualification: 12/04/1964 Document number: 708195
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)

Panza, Maurer & Maynard, P.A.

3600 N. Federal Highway

Fort Lauderdale, FL 33308

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

Panza, Maurer & Maynard, P.A.

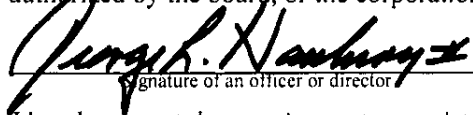
2400 East Commercial Boulevard, Suite 905

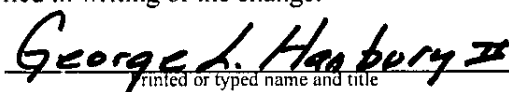
P.O. Box NOT acceptable

Fort Lauderdale, FL 33308

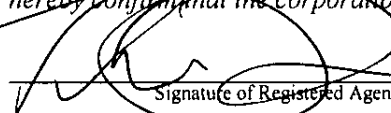
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

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 of an officer or director

  
\_\_\_\_\_  
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.*

  
\_\_\_\_\_  
Signature of Registered Agent

4-15-16  
\_\_\_\_\_  
Date

If signing on behalf of an entity:

Thomas F. Panza, Esq. - Partner  
\_\_\_\_\_  
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)

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