709584

(Requestor's	Name)
(Address)	
(Address)	·
(Address)	
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(City/State/Zip	p/Phone #)
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2022 SEP 20 AM 9: 44 2022

A. BUTLER SEP 2 1 2022 CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195	
REFERENCE : 962289 4311639	
AUTHORIZATION : Squelle reas	
COST LIMIT : (\$ 35.00	
ORDER DATE : September 19, 2022	
ORDER TIME : 9:10 AM	
ORDER NO. : 962289-005	
CUSTOMER NO: 4311639	
<u>CHANGE OF AGENT</u>	
NAME: INDIAN RIVER STATE COLLEGE FOUNDATION, INC.	
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:	
CERTIFIED COPY XX PLAIN STAMPED COPY	
CONTACT PERSON: Eyliena Baker EXT#	
EXAMINER:	

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

statement of cha	provisions of sections 607.0302, 617.0302, 607.1308, or 617.1308, Florida Statutes inge is submitted for a corporation organized under the laws of the State of <u>Florid</u> ir to change its registered office or registered agent, or both, in the State of Florida.	a	
	the corporation: Indian River State College Foundation, Inc.		
2. The principal			
3. The mailing a	address (if different):		
4. Date of incorp	poration/qualification: September 14, 1965 Document number: 709584	<u> </u>	
	d street address of the current registered agent and registered office on file with the timent of State: (If resigned, enter resigned)	3 2003 2003	7707
	Richard V. Neill, Jr.	— rî	טבר
	311 South 2nd Street		5
	Fort Pierce, Florida 34950	OF S	Ξ
6. The name and (if changed):	d street address of the new registered agent (if changed) and /or registered office	E TATE	44 :6
	Corporation Service Company		
	1201 Hays Street		
	P.O. Box NOT acceptable		
	Tallahassee, Florida 32301		
The street address changed will	ess of its registered office and the street address of the business office of its regist be identical.	tered age	ent,
Such change wanthorized by the	as authorized by resolution duly adopted by its board of directors or by an officer ne board, or the corporation has been notified in writing of the change.	· so	
michael hageloh	Michael Hageloh, Interim Vice Presi	dent	_
I hereby accept I further agree i of my duties, an document is bei	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 p d I am familiar with and accept the obligation of my position as registered agen ng filed merely to reflect a change in the registered office address, I hereby conf. been notified in writing of this change.	performa t. Or. if	this:
EN	erDea 9/20/22		
Sign	nature of Registered Agent Date		
If agning on be	half of an entity:		
Ť,	yped or Printed Name		

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (04/13)

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