# 720534

(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:			

Office Use Only



200326871782

04/01/19--01017--010 \*\*35.00





#### **COVER LETTER**

TO: Amendment Section Division of Corporations

## SUBJECT: Florida Republican Building Fund, Inc.

Name of Corporation

DOCUMENT NUMBER, 720534

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:

### Kay Linton

Name of Contact Person

#### Florida Republican Building Fund, Inc.

Firm/Company

#### 420 E. Jefferson Street

Address

#### Tallahassee, FL 32301

City/State and Zip Code

## klinton@rpof.org

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

For further information concerning this matter, please call:

Kay Linton

 $^{\prime}$ 850  $^{\prime}$ 

222-0202

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 cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508. F ange is submitted for a corporation organized under the laws of the Sc er to change its registered office or registered agent, or both, in the Sc	tate of Florida	
	the corporation: Florida Republican Building Fund, Inc.	_	
2. The principal	Loffice address: 420 E. Jefferson Street see, FL 32301		
	address (if different): P.O. Box 311		
4. Date of incorp	rporation/qualification: Document number: 7	20534	
5. The name and	d street address of the current registered agent and registered office or artment of State: (If resigned, enter resigned)		
	George Riley, ED		
	420 E. Jefferson Street		
	Tallahassee, FL 32301	2018 APR-1	
6. The name and (if changed):	d street address of the new registered agent (if changed) and /or regist	ered office	
	Jennifer Locetta, ED		
	420 E. Jefferson Street	<b>.</b>	
	Tallahassee, FL 32301		
The street addre	ess of its registered office and the street address of the business offi- l be identical.	ce of its registered agent.	
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.			
	States Tre Grote	us.	
I hereby accept I further agree performance of agent. Or, if the hereby confirm	Printed of typed han  I the appointment as registered agent and agree to act in this capaci to comply with the provisions of all statutes relative to the proper a f my duties, and I am familiar with and accept the obligation of my pairs document is being filed merely to reflect a change in the registered that the corporation has been notified in writing of this change.  March 27  patture of Registered Agent  Date	oosition as registered ed office address, I	
J } ()	chalf of an entity;		
Jennifer	ryped or Printed Name		

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