## 724060

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ALLAHASSEE, FLOR

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C T CORPORATION SYSTEM	•		
Requestor's Name 660 East Jefferson Stre	æt		
Address Tallahassee, FL 32301	(850)222-1092		
City State Zip	Phone		
CORPORATI	ION(S) NAME		
	······································		
Mandaria Ludge	No. 42 Louis	1 Order 0:	F Moose Inc
,			
( ) Profit			
() NonProfit	() Amendm	nent	() Merger
() Limited Liability Compar () Foreign		on/Withdrawal	() Mark
() Limited Partnership	() Annual F		() Other
() Reinstatement () Limited Liability Partn	() Reservat	.10N	Change of R.A.
() Certified Copy	() Photo Co	opies	() Fictitious Name () CUS
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CR2E031 (1-89)

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

Pursuant to th	e provisions of sections	607.0502, 617.0502	, 607.1508, or 617.1508, F	lorida Statutes	•
	of change is submitted fo	r a corporation orga	nized under the laws of the S	State of	
Florida	in order to chan	ge its registered offic	ce or registered agent, or bo	oth, in the State	2
of Florida.	. MAND	ADIN LODGE NO. 42	LOVAL OPDED OF MOOSE		
			LOYAL ORDER OF MOOSE	AH	
2. The principa	l office address: 4450 L	osco Road, PO Box 24	4596, Jacksonville, FL 32241	<u> </u>	
				SE T	
3. The mailing	address (if different):			平 至	_
	<u></u>			OR I	<del></del>
4. 75 - 4 6		8/8/72	Document number:724	- <del></del>	5
•	=				<del></del>
		urrent registered agen	it and registered office on file	e with the	
гюнаа Бера	artment of State: Lexis Document Service	es inc		-	
				m v · · ·	
	3953 WW Kelley Road	<u> </u>		· •	•
	Tallahassee, FL 32311				•
6. The name a	nd street address of the	new registered ager	nt (if changed) and /or regis	stered office (i	f
changed):			( 0 ) 5	`	
	CT Corporation System				
	c/o CT Corporation Syst	·			
·	Plantation, Florida 3332	Box or personal mailbox NOT	acceptable)		
				-	•
The street addingent, as change	ess of its registered offi ged will be identical.	ce and the street add	ress of the business office o	f its registered	
•	•	ion duly adopted by	its board of directors or by and in writing of the change.	an officer so	
authorized by	ne board, or the corpora	4	ed in writing of the change. EPH L. CLEVENGO	FR Aren	IISTRATOR
//	er, chairman or vice chairman of the	board)	(Printed or typed name and title)	1- 110mm	13)14.14.
I hereby accep	t the appointment as reg to comply with the prov	gistered agent and ag visions of all statutes	gree to act in this capacity. relative to the proper and c	complete	
nertormance o	t mv duties, and I am tai	miliar with and acce	pt the obligation of my posi	tion as	
office address	I hereby confirm that th	e corporation has b	to reflect a change in the reen notified in writing of thi	s change.	
	Clen Co		3-(2-63 (Date)	<del></del>	, m dru
If signing on beha	Agnature of Registered Agent)		Jeffrey R. Graves		
CT Corporation			Assistant Secretary		
	(Typēd or Printed Name)		(Capacity)	<u> </u>	9E2 97 777

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