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COVER LETTER

Amendment Section Division of Corporations TO:

_{suвјест:} Tampa Metropolitan Area YMCA
Name of Corporation
DOCUMENT NUMBER:
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:
Joe Mangione
Name of Contact Person
Tampa Metropolitan Area YMCA
Firm/Company
110 E. Oak Avenue
Address
Tampa, Fl. 33602
City/State and Zip Code
joe.mangione@tampaymca.org
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Joe Mangione Name of Contact Person at (813) 224-9622 Area Code & Daytime Telephone Number
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

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 Floridain order to change its registered office or registered agent, or both, in the State of Florida.	
1. The name of the corporation: Tampa Metropolitan Area Young Men's Christian Associated 2. The principal office address: 110 East Oak Avenue, Tampa Fr. 33602	him, Inc.
3. The mailing address (if different):	•
4. Date of incorporation/qualification: 04/11/1977 Document number:	• , •
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)	
Robert H. Buesing - Trenam Kemker Attorneys	
101 E. Kennedy Boulevard, Suite 2700	
Tampa, Fl. 33602	TAS
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed): Alfred A. Colby -Mechanik Nuccio Hearne & Wester, P.A.	ECRETARY LLARASSE
305 S. Boulevard	
P.O. Box NOT acceptable	SR A
Tampa, Fl. 33606	Ωmi ⊳
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, of the corporation has been notified in writing of the change.	
Tom Looby - President/CEO Signature of an officer dy 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.	
March (d. Cal) 9/19/2013	
Signature of Registered Agent If signing on behalf of an entity:	
Typed or Printed Name	