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Office Use Only



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CT 1203 Governors Square Blvd. Tallahassee, Fl. 32301-2960 850 222 1092 tel 850 222 7615 fax www.ctlegalsolutions.com

October 15, 2009

Department of State, Florida Clifton Building 2611 Executive Center Circle Tallahassee FL 32301

Re: Order #: 7677654 SO

Customer Reference 1: COA

Customer Reference 2: None Given

Dear Department of State, Florida:

Please obtain the following:

Big Pine Key Lodge No. 1585 Loyal Order of Moose, Inc. (FL) Change of Agent Florida

Enclosed please find a check for the requisite fees. Please return document(s) to the attention of the undersigned.

If for any reason the enclosed cannot be processed upon receipt, please contact the undersigned immediately at (850) 222-1092. Thank you very much for your help.

Sincerely,

Freddy Morales Corporate Operations Mgr. freddy.morales@wolterskluwer.com

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

statement of ch	ange is submitted for a co	rporation organiz	, 607.1508, or 617.1508, Flor wed under the laws of the State wed agent, or both, in the State	of Florida
1. The name of	the corporation: Big Pine I	Key Lodge No. 15	85 Loyal Order Of Moose, Inc.	
2. The principa	l office address: R RD, LODGE 1585 BIG P			
•	address (if different): 430749 BIG PINE KEY FI			
4. Date of inco	rporation/qualification:	08/09/77	Document number:	739867
5. The name an		rent registered age	ent and registered office on fil	e with the
	CORPORATION SERV	ICE COMPANY		
	1201 HAYS STREET TA	ALLAHASSEE FL	. 32301	·.
6. The name an (if changed):		v registered agent	(if changed) and /or registered	d office TAPEO
	c/o C T Corporation Syste	em, 1200 South Pi		
	Plantation, Florida 33324		accpanic	
The street addr as changed wil	ress of its registered office l	e and the street a	ddress of the business office	of its registered agent,
Such change wathorized by t	vas authorized by resoluti the board, or the corporat	on duly adopted ion has been noti	by its board of directors or b ified in writing of the change	y an officer so
į	1/2-/		Kimberly Breunling,	
I hereby accep I further agree of my duties, and document is be corporation ha  By: P C T Si	to comply with the provind I am familiar with and ing the street of the proving filed merely to reflect is been notified in writing Corporation System	sions of all statu l accept the oblig t a change in the t of this change.	Printed or typed name agree to act in this capacity tes relative to the proper and gation of my position as regis registered office address, 1 h	complete performance tered agent. Or, if this tereby confirm that the
	rth Assistant Secreta ehalf of an entity:	at À		
7	Typed or Printed Name	<del></del>		

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (8/05)

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