744319

. (Re	equestor's Name)	
(Ad	ldress)	
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(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
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10 ACKNOWLEDGE
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ACCOUNT NO. : 07210000032
REFERENCE : 321056 7394358
AUTHORIZATION: 321056 7394358
COST LIMIT : \$ 35.00
ORDER DATE: November 15, 2007
ORDER TIME : 9:48 AM
ORDER NO. : 321056-210
CUSTOMER NO: 7394358
CHANGE OF AGENT
CHANGE OF AGENT
NAME: GAINESVILLE LODGE NO. 1140,
LOYAL ORDER OF MOOSE, INC.
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:
CERTIFIED COPY XX PLAIN STAMPED COPY
CONTACT PERSON: Debbie Skipper EXT# 2948
EXAMINER:

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, Florida Statutes, this nge is submitted for a corporation organized under the laws of the State of Florida r to change its registered office or registered agent, or both, in the State of Florida.
1. The name of t	he corporation: GAINESVILLE LODGE NO. 1140, LOYAL ORDER OF MOOSE, INC.
	office address: 14212 N W 154th Avenue, Alachua, FL 32615
3. The mailing a	ddress (if different): P O Box 234, Gainesville, FL 32602
4. Date of incorp	poration/qualification: 09/18/1978 Document number: 744319
	street address of the current registered agent and registered office on file with the tment of State:
	John E. Prudhomme
	6306 C W Webb Road
	John E. Prudhomme 6306 C W Webb Road MacClenny, FL 32063 street address of the new registered agent (if changed) and /or registered office
6. The name and (if changed):	street address of the new registered agent (if changed) and /or registered office
	Corporation Service Company
	1201 Hays Street
	(P.O. Box NOT acceptable)
	Tallahassee, FL 32301
The street addre as changed will	ess of its registered office and the street address of the business office of its registered agent, be identical.
Such change was authorized by the	is authorized by resolution duly adopted by its board of directors or by an officer so le board, or the corporation has been notified in writing of the change.
Mazer (Signatu	Maureen Cullen, Attorney In Fact (Printed or typed name and title)
of my duties, an document is beil corporation has	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 performance of I am familiar with and accept the obligation of my position as registered agent. Or, if this not filled merely to reflect a change in the registered office address, I hereby confirm that the been notified in writing of this change. Service Company
By My	enature of Registered Agent) (Date)
If signing on be	half of an entity:
Michelle R. Vani	noy, Assistant Vice President
(T	yped or Printed Name)

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

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