10/5/22, 2:29 PM

Division of Corporations



Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H22000342072 3)))



H220003420723ABCW

**Note:** DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (8

: (850)617-6380

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (954)208-0845 Fax Number : (614)573-3996

\*\*Enter the email address for this business entity to be used for future, annual report mailings. Enter only one email address please.\*\*

Email	Address:			
CILIDITI	MUUI C33.			

## REGISTERED AGENT CHANGE

FORT PIERCE LODGE NO. 248, LOYAL ORDER OF MOOSE, INC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$35.00

Electronic Filing Menu

Corporate Filing Menu

Help



To:

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

statement of cha	nge is submitted for a corporation o	7.0502, 607.1508, or 617.1508, Florida St organized under the laws of the State of $rac{\Gamma}{\Gamma}$	L	us ———	-		
		egistered agent, or both, in the State of Fl					
		OGE NO. 248, LOYAL ORDER OF MOOS	E. INC.		_		
2. The principal	office address: 325 PANDORA AVE	FORT PIERCE, FL 34951		_	_		
					_		
_	ddress (if different):				_		
4. Date of incorp	oration/qualification: 4/22/2008	Document number: 750713			_		
	street address of the current registe tment of State: (If resigned, enter re	red agent and registered office on file with signed)	h the				
	Christopher Jay Alberts						
	325 PANDORA AVE						
	FORT PIERCE, FL 34951		رن آ_ا <del>ا-</del> 5	202			
6. The name and (if changed):	street address of the new registered	l agent (if changed) and /or registered offi	11.67.17. 11.67.17.	1022 OCT -5	e.,		
	C T Corporation System		#1 #125		<del>,</del>		
	1200 South Pine Island Road		FSTAT	AM 11: 2:			
	P.	O. Box NOT acceptable					
	Plantation, Florida 33324		ריו	£-			
The street addre	ss of its registered office and the st be identical.	treet address of the business office of its	registere	:d agen	ı,		
Such change wa authorized by th	s authorized by resolution duly adde board, or the corporation has been	opted by its board of directors or by an o in notified in writing of the change.	officer so				
Christoph	e of an Alberta	Christopher Jay Alberts					
		Printed or typed name and title					
I hereby accept I further agree t of my duties, an document is beil corporation has CI Corporation	the appointment as registered ager o comply with the provisions of all d I am familiar with and accept the ng filed merely to reflect a change been notified in writing of this cha System	nt and agree to act in this capacity. I statutes relative to the proper and comp vobligation of my position as registered in the registered office address, I hereby ange.	olete perf agent. (v Confirm	Formand Or, if th That th	ce is ie		
Jan 12 M		10/5/2022					
( High	nature of Registered Agent	Date			•		
lf signing on be	half of an entity:						
Jayna Nickell, As	sst. Secretary						
Ty	ped or Printed Name						
	* * * FILING	G FEE: \$35.00 * * *					

Make Checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 Cr26045 (04/13)

By: