75/197

(Requestor's Name)				
(Address)				
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(City/State/Zip/Phone #)				
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(Business Entity Name)				
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RA. Chang C.COULLIETTE OCT 15 2009 EXAMINER





 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 #: 7678451 SO

Customer Reference 1: COA

Customer Reference 2: None Given

Dear Department of State, Florida:

Please obtain the following:

Tallahassee Lodge No. 1075, 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,

Connie R Bryan Senior Fulfillment Specialist Connie.Bryan@wolterskluwer.com

COVER LETTER

то:	Amendme Division of	ent Section of Corporations			
SUBJECT: Tallahassee Lodge No. 1075 Loyal Order of Moose, Inc.					
0020		Name of Corp	poration		
DOC	U MENT N I	UMBER: 75	1197		
		ement of Change of Registered Office/A	agent and fee are submitted for filing.		
Please	return all c	orrespondence concerning this matter to	the following:		
		Name of Conta	ct Person		
Firm/Company			pany		
		Addres	g		
		Addies	.		
City/State and Zip Code					
	_				
E-mail address: (to be used for future annual report notification)					
For fu	rther inform	nation concerning this matter, please call	:		
	Na	ame of Contact Person	at () Area Code & Daytime Telephone Number		
	IND	anie of Contact Person	Area Code & Daytime Telephone Number		
Enclo	sed is a \$35.	.00 check made payable to the Departme	ent of State.		
		Mailing Address: Amendment Section	Street Address: Amendment Section		
		Division of Corporations P.O. Box 6327	Division of Corporations Clifton Building		
		Tallahassee, FL 32314	2661 Executive Center Circle		

Tallahassee, FL 32301

CR2E045 (8/05)

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

in orde	nge is submitted for a corporation organized under the laws of the State of $\frac{Flor}{Flor}$ r to change its registered office or registered agent, or both, in the State of Flori			
1. The name of t	he corporation: Tallahassee Lodge No. 1075, Loyal Order of Moose, Inc.			
2. The principal 1478 CAPITA	office address: L CIRCLE NW TALLAHASSEE FL 32303			
3. The mailing a	ddress (if different):			•
4. Date of incorp	poration/qualification: 02/22/80 Document number:	751197		
	street address of the current registered agent and registered office on file with the timent of State: (If resigned, enter resigned)	he		
	CORPORATION SERVICE COMPANY			
1201 HAYS STREET TALLAHASSEE FL 32301				
			99 0	
6. The name and (if changed):	street address of the new registered agent (if changed) and /or registered office	18.50 E	CT 15	of Scotter Report Registration of Registration of Registration of
	C T Corporation System		7	Fair a
	c/o C T Corporation System, 1200 South Pine Island Road P.O. Box NOT acceptable		2:21	
	Plantation, Florida 33324			
=	ess of its registered office and the street address of the business office of its rebe identical.		l agent	t,
authorized by th	is authorized by resolution duly adopted by its board of directors or by an office board, or the corporation has been notified in writing of the change.			
	Kimberly Breunling, Vice Pre	esident		
I hereby accept I further agree to of my duties, an document is bei	the appointment as registered agent and agree to act in this capacity, o comply whith the provisions of all statutes relative to the proper and compled I am familiar with and accept the obligation of my position as registered and filed merely to reflect a change in the registered office address, I hereby to been notified in writing of this change.	ete perfo gent. O confirm	ormand r, if th that th	ce is e
By: Zell	Corporation System 10/15/2009			
	nature of Registered Agent Date th, Assistant Secretary			
	half of an entity:			
To	yped or Printed Name			

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

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