## 751255

(Requestor's Name)					
(Address)					
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(Address)					
(City/State/Zip/Phone #)					
(Business Entity Name)					
(Document Number)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					



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To: Department Of State, Division Of Corporations From: Amanda Miller - Amanda.Miller@cscglobal.com Ext: x62969 Date: 12/18/24 Order #: 1723101-2 Re: Oneblood Foundation, Inc. Processing Method: Routine



TO WHOM IT MAY CONCERN:

Enclosed please find: Change of Registered Agent and Office Check in the amount of: \$35.00 - FL State Account Number: I20000000195

Please take the following action:

File on a routine basis Issue proof of filing Return evidence to the following: ATTN: Amanda Miller c/o Corporation Service Company 251 Little Falls Drive Wilmington, DE 19808 2024 DEC 19 PM 2: 30 SECRETARY OF STATE TALLAHASSEE, FL

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Special Instructions:

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

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

1. The na	ame of the corporation:ONEBLOOD FOUNDATIO	ON, INC.		
2. The pr	rincipal office address: 10100 Dr Martin L King Jr	Street N, Saint Petersburg, FL 337	16	
3. The m	nailing address (if different):			
4. Date of	of incorporation/qualification: February 26, 1980	Document number:751255		
	ame and street address of the current registered age a Department of State: (If resigned, enter resigned)		he	
	F & L Corp			
	Оле Independent Drive, Suite 1300	Опе Independent Drive, Suite 1300		
	Jacksonville	FL 32202		
	ame and street address of the new registered agent ( inged):	(if changed) and /or registered office	2024 DEC 1 SECRETA TALLAF	
	Corporation Service Company		LAT	pp spr parent
	1201 Hays Street		A DEC 19 PH ECRETARY OF TALLAHASSE	T
		TOT acceptable	4 2: 31 EE. FI	C
	Tallahassee	FL 32301	FL 30	

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, or the corporation has been notified in writing of the change.

/s/ Martin Grable	Martin Grable	EVP	
Signature of an officer or director	Printed or typed nam	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 mercly to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

Corporation Service Company

By: Rindsey M. Lackard

Usignature of Registered Agent Lindsey M. Lockard, Assistant Vice President

If signing on behalf of an entity:

Typed 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 (04/13)

12/11/2024

Date