768763

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William Duranton State To State

STORETARY OF STATE
TALLAHASSEE, FL

To intertac

COVER LETTER

TO: Amendment Section Division of Corporations	
SUBJECT: College Park Towers II, Inc. Name of Corporation	
DOCUMENT NUMBER: 768703	
The enclosed Statement of Change of Registered 6	Office/Agent and fee are submitted for filing.
Please return all correspondence concerning this n	natter to the following:
Stacy Shumate	
Name of Contact Person	
Firm/Company	
One-E. 4th St., Suite 1400	
Address	
Cincinnati, OH 45202	
City/State and Zip Code	
sshumate@kmklaw.com	
E-mail address: (to be used for future annual r	report notification)
For further information concerning this matter, ple	ease call:
Stacy Shumate	at (513) 579-6465
Name of Contact Person	at (513) 579-6465 Area Code & Daytime Telephone Number
Enclosed is a \$35.00 check made payable to the D	
Mailing Address: Amendment Section Division of Corporations P.O. Box 6327	Street Address: Amendment Section Division of Corporations The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

CR2E045 (04/13)

Tallahassee, FL 32314

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

statement of cha	nge is submitted for a corporatio	617.0302 , 607.1308 , or 617.1308 , Florida 8 on organized under the laws of the State of $\underline{1}$	FLORIDA
		or registered agent, or both, in the State of F	lorida.
1. The name of t	he corporation: College Park Tov	wers II, Inc.	
2. The principal	office address: 795 RIDGE LAKE	E BLVD., SUITE 300, MEMPHIS, TN 38120	
3. The mailing a	ddress (if different):		
4. Date of incorp	oration/qualification: 5/31/1983	Document number: 768703	
	street address of the current regi	istered agent and registered office on file with resigned)	th the
	Amy Bock	<u></u>	
	1914 Edgewater Dr.		
	Orlando, FL 32804		
6. The name and (if changed):	street address of the new registe	ered agent (if changed) and /or registered off	īce
	CORPORATION SERVICE CON	MPANY	
	1201 HAYS ST.		
		P.O. Box NOT acceptable	•
	TALLAHASSEE, FL 32301		
The street addre	ss of its registered office and the	ne street address of the business office of its	s registered agent,
Such change wa authorized by th	s authorized by resolution duly c board, or the corporation has	adopted by its board of directors or by an been notified in writing of the change.	officer so
10		MATTHEW OSBORNE, PRESID	ENT
- 0	of an officer or director	Printed or typed name and tit	
I hereby accept I further agree to of my duties, and document is bein corporation has	the appointment as registered a o comply with the provisions of d I am familiar with and accept ng filed merely to reflect a chan been notified in writing of this	agent and agree to act in this capacity. I all statutes relative to the proper and com I the obligation of my position as registered age in the registered office address, I hereb change.	plete performance lagent. Or, if this y confirm that the
Brittani	i Aunst	08/11/2020	
Sign	ature of Registered Agent	Date	
If signing on bel	nalf of an entity:		

Brittany Aunet, Assistant Secretary, Corporation Service Company
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)