842948

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COVER LETTER

TO: Amendment Section Division of Corporations Paul J. Ford and Company Name of Corporation 842948 DOCUMENT NUMBER: The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Marsha McCauley Name of Contact Person Paul J. Ford and Company Firm/Company 250 E. Broad St., Suite 600 Address Columbus, OH 43215 City/State and Zip Code mmccauley@pifweb.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Marsha McCauley Area Code & Daytime Telephone Number Name of Contact Person Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

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

statement of cha	provisions of sections 607.0502, 617.0 inge is submitted for a corporation org r to change its registered office or reg	ganized under the laws of the	State of Ohio	
1. The name of	the corporation: Paul J. Ford and	Company		
2. The principal office address: 250 E. Broad St., Suite 600				
	Columbus, OH 43	215		
3. The mailing a	address (if different):	· · · ·		
4. Date of incor	poration/qualification: 4/5/1979	Document number:	842948	
	d street address of the current registere rtment of State: (If resigned, enter resigned)		on file with the	
	Kevin G. Casey		 .	
	3670 Maguire Blvd, Suite 250 Orlando, FL 32803			
	Orlando, FL 32803		06 2 06 2	
6. The name and (if changed):	d street address of the new registered a	gent (if changed) and /or regi	stered office	
	William M. Mitzo			
	1801 Lee Rd, Suite 230			
	P.O. Box NOT acceptable			
	Winter Park, FL 32789			
The street address changed will	ess of its registered office and the stre be identical.	eet address of the business of	fice of its registered agent,	
Such change was authorized by the	as authorized by resolution duly adop ne board, or the corporation has been	ted by its board of directors on notified in writing of the cha	or by an officer so nge.	
Ail	ure of an officer or director	David W. Hawkins, I	President	
I hereby accept I further agree performance of agent. Or, if th hereby confirm	the appointment as registered agent to comply with the provisions of all st my duties, and I am familiar with an is document is being filed merely to r that the corporation has been notifie	Printed or typed n and agree to act in this capa tatutes relative to the proper d accept the obligation of my eflect a change in the registe d in writing of this change.		
Waler	mature of Rogistered Agent	8/19/14		
Sig	nature of Rogistered Agent	Date		
If signing on be	chalf of an entity:			
William M. M				
Т	yped or Printed Name			

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (03/12)

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