**Division of Corporations** Electronic Filing Cover Sheet 

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To:

Division of Corporations

Fax Number

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: (850)617-6380

From:

Account Name : CORPORATION SERVICE COMPANY

Account Number: I2000000195 Phone : (850)521-1000 : (850)558-1515

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

Email Address:

## REGISTERED AGENT CHANGE FLORIDA COASTAL SCHOOL OF LAW, INC.

Certificate of Status	0
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Estimated Charge	\$35.00

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Help

STATEMEN	T OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS
Pursuant to the	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this
statement of cha	nge is submitted for a corporation organized under the laws of the State of Delaware
	r to change its registered office or registered agent, or both, in the State of Florida.
1. The name of t	he corporation: FLORIDA COASTAL SCHOOL OF LAW, INC.
2. The principal	office address: 8787 Baypine Rd., Suite 301, Naples, FL 34102
3. The mailing a	ddress (if different): 1100 5th Avenue S., Suite 301, Naples, FL 34102
4. Date of incorp	poration/qualification: 10/03/2003 Document number: F03000004947
	street address of the current registered agent and registered office on file with the tment of State:
•*	CT Corporation System
	1200 South Pine Island Rd.
	Plantation, FL 33324
6. The name and (if changed):	Plantation, FL 33324  Street address of the new registered agent (if changed) and /or registered office
	Corporation Service Company
	1201 Hays Street
	(P.O. Box NOT acceptable)
	Tallahassee, FL 32301
The street address changed will	ess of its registered office and the street address of the business office of its registered agent, be identical.
Such change was	is authorized by resolution duly adopted by its board of directors or by an officer so board, or the corporation has been notified in writing of the change.

If signing on behalf of an entity:

Sylvia Queppet, Asst. VP

By: ≤

(Typed or Printed Name)

(Signature of Registered Agent)

Corporation Service Company

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

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 merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

01/07/2011

Maureen Cathell, Attorney in Fact

(Date)

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E(45 (8/05)