## F04000006354

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## **COVER LETTER**

Division	of Corporatio	ns						
SUBJECT:	CoA	dvantage Resources (\	V, Inc.					
B0130001		Name of (	Corporatio	n				
DOCUMENT N	UMBER:	F04000006354		·				
The enclosed Sta	tement of Cha	nge of Registered Offi	ice/Agent :	and fee ar	e submitted for t	filing.		
Please return all	correspondenc	e concerning this matt	er to the fo	ollowing:				
		Darlene Lemke						
		Name of Co	ontact Pers	son	· · · · · · · · · · · · · · · · · · ·			
		CoAdvantage						
		Firm/C	ompany					
		111 W Jefferson S	St					
		Ado	dress			-		
	Orlando, FL 32801							
	City/State and Zip Code							
		dlemke@coadvar	ntage.com					
	E-mail add	lress: (to be used for	future and	nual repo	rt notification)			
For further inform	nation concerr	ning this matter, please	call:					
Darler	ne Lemke		at ('	407	447-1895 & Daytime Teler			
Na	ame of Contac	t Person	Ar	ea Code &	& Daytime Telep	hone Nu	ımber	
Enclosed is a \$35	.00 check mad	de payable to the Depar	rtment of	State.		SECRET	13 OCT -	
	Amend Divisid P.O. B	g Address: dment Section on of Corporations fox 6327 assee, FL 32314		Division Clifton 2 2661 Ex	ddress: nent Section n of Corporatio Building secutive Center ssee, FL 32301	10. 10.	-1 PH 12: 25	

CR2E045 (03/12)

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

	607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this corporation organized under the laws of the State of North Carolina
in order to change its register	ed office or registered agent, or both, in the State of Florida.
1. The name of the corporation:	CoAdvantage Resources IV, Inc.
2. The principal office address:	3350 Buschwood Park Drive - Ste 200
	Tampa, FL 32801
3. The mailing address (if different):	111 W Jefferson St
	Orlando, FL 32801
4. Date of incorporation/qualification:	11/08/2004 Document number: F04000006354
5. The name and street address of the c Florida Department of State: (If resig	current registered agent and registered office on file with the gned, enter resigned)
Mark Lowrey	
111 W Jefferso	on Street
Orlando, FL 32	2801
6. The name and street address of the n (if changed):	new registered agent (if changed) and /or registered office
Jeffrey J. Sjobe	eck
3350 Buschwo	od Park Dr - Ste 200
	P.O. Box NOT acceptable
Tampa, FL 33	618
The street address of its registered offias changed will be identical.	ice and the street address of the business office of its registered agent,
Such change was authorized by resolu authorized by the board, or the corpora	tion duly adopted by its board of directors or by an officer so ation has been notified in writing of the change.
Signature of an officer or director	Miguel A. Maseda, President/CEO Printed or typed name and little
I hereby accept the appointment as res I further agree to coniply with the prov performance of my duties, and I am fa agent. Or, if this document is being fi	gistered agent and agree to act in this capacity. visions of all statutes relative to the proper and completed milliar with and accept the obligation of my position as registered led merely to reflect a change in the registered office address, I as been notified in writing of this change.
Signature of Registered Agent	9/30/13 Pa 70 70 C
If signing on behalf of an entity:	Date DRUL 25
Jeffrey J. Sjobeck Typed or Printed Name	

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