

F070000002589

(Requestor's Name)

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(Address)

(City/State/Zip/Phone #)

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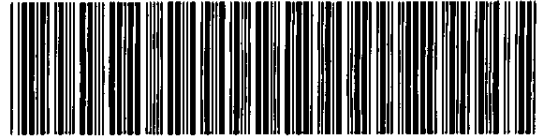
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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MAR 14 2018

ALBRITTON



115 N CALHOUN ST., STE. 4
TALLAHASSEE, FL 32301
866.625.0838
COGENCYGLOBAL.COM

Date: March 13, 2018

Account#: I20000000088

Name: Marisa Kugelman

Reference #: C021434

Entity Name: CSDVRS MANAGEMENT SERVICES, INC.

☐ Articles of Incorporation/Authorization to Transact Business

☐ Amendment

☒ Change of Agent

☐ Reinstatement

☐ Conversion

☐ Merger

☐ Dissolution/Withdrawal

☐ Fictitious Name

☐ Other _____

Authorized Amount: \$35.00

Signature: Marisa Kugelman

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FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 13, 2018

COGENCYGLOBAL
115 N. CALHOUN ST
STE. 4
TALLAHASSEE, FL 32301

SUBJECT: CSDVRS MANAGEMENT SERVICES, INC.
Ref. Number: F07000002589

This will acknowledge receipt of your correspondence which is being returned for the following reason(s):

The registered agent information was updated on the 2018 annual report filed on March 6, 2018.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Irene Albritton
Regulatory Specialist II

Letter Number: 218A00005008

**STATEMENT 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 change is submitted for a corporation organized under the laws of the State of Delaware in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: CSDVRS MANAGEMENT SERVICES, INC.

2. The principal office address: 600 CLEVELAND STREET, SUITE 1000 CLEARWATER FL 33755

3. The mailing address (if different): _____

4. Date of incorporation/qualification: May 15, 2007 Document number: F07000002589

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

Cogencyglobal
115 N Calhoun St., Ste 4
Tallahassee, FL 32301

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

COGENCY GLOBAL INC.

115 North Calhoun St., Suite 4

P.O. Box NOT acceptable

Tallahassee, FL 32301

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/ Sherri Turpin

Signature of an officer or director

Sherri Turpin, President

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



Signature of Registered Agent

3/12/2018

Date

If signing on behalf of an entity:

Sean Honan, Assistant Secretary

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

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