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DATE:

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NAME:

LOTSPEICH & ASSOCIATES, INC.

TYPE OF FILING: CHANGE OF AGENT

COST:

35.00

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ACCOUNT: FCA000000015

**AUTHORIZATION: ABBIE/PAUL HODGE** 

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

statement of cha	provisions of sections 607.0502, 617.0502. unge is submitted for a corporation organizar to change its registered office or registere	ed under the laws of the State	of Fiori	his da
1. The name of	the corporation: LOTSPE	EICH & ASSOCIAT	ES, INC	•
2. The principal	office address: South Street Ste 700	Orlando	FL	32801
-	address (if different):	Orlando	FL	32801
4. Date of incorporation/qualification: December 2, 1980 Document number:		F08489		
	d street address of the current registered age rtment of State: (If resigned, enter resigned)		e with the	
	THOMAS, R	ENEE	_	
	2711 W. FAIRBANI	KS AVENUE		
	WINTER PARK,	FL 32789		
6. The name and (if changed):	National Corporate Resea		l office	13 MA Segre
	155 Office Plaza Drive P.O. Box NOT acc	ceptable	ASS	
	Tallahassee, FL 32301	· · · · · · · · · · · · · · · · · · ·	· 原	Y 9
	ess of its registered office and the street ad be identical.		· بحد :	ag ag <b>cin</b> .
Such change wa authorized by th	is authorized by resolution duly adopted by the board, or the corporation has been notifi	y its board of directors or by a led in writing of the change.	an officerso	₩ <b>6</b>
	to of an officer oydirector	Karl S. Palvisak	Ptitle P	<del></del>
I hereby accept I further agree t performance of agent. Or, if thi hereby confirm	the appointment as registered agent and a to comply with the provisions of all statute my duties, and I ain familiar with and acce is document is beingifiled merely to reflect that the corporation has been notified in w	gree to act in this capacity, s relative to the proper and c ept the obligation of my posit a change in the registered of riting of this change.	omplete ion as regist (fice address	ered , I
67/		05/09/201	13	
If signing on bel	nature of Registered Agent	Date		•
-	Assistant Sagatan			

Mark Thomas, Assistant Secretary

J. 37-00

Typed or Printed Name

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