

FI 0000002447

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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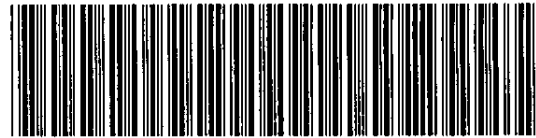
(Business Entity Name)

(Document Number)

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DEPARTMENT OF STATE
16 JUL 24 PM 1:55

2015 JUL 24 AM 8:57
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

JUL 27 2014

C. CARROTHERS

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 722257 7435542

AUTHORIZATION :

COST LIMIT : \$35.00

ORDER DATE : July 24, 2015

ORDER TIME : 1:10 PM

ORDER NO. : 722257-005

CUSTOMER NO: 7435542

CHANGE OF AGENT

NAME: CHH ENTERPRISES, INC.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

____ CERTIFIED COPY
XX PLAIN STAMPED COPY

CONTACT PERSON: Courtney Williams

EXAMINER'S INITIALS: _____

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: 742-6322CHH Enterprises, Inc. dba CHH Enterprises Inc. of MD
Name of Corporation

DOCUMENT NUMBER: F10000002447

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:

Eileen M. Gorman

Name of Contact Person

Blackthorn Law Group, LLP

Firm/Company

1725 I Street, NW, Suite 300

Address

Washington, DC 20006

City/State and Zip Code

emg@blackthornlaw.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Eileen M. Gorman

202

742-6322

at ()

Name of Contact Person

Area Code & Daytime Telephone Number

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**

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 Maryland in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: CHH Enterprises, Inc. dba CHH Enterprises, Inc. of MD
2. The principal office address: 1101 New York Avenue, NW, Suite 675, Washington, DC 20005
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 5/24/2010 Document number: F10000002447

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)

NRAI Services, Inc.

1200 South Pine Island Road

Plantation, Florida 33324

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

Corporation Service Company

1201 Hays Street

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.

DocuSigned by:



Patrick Paquette, CFO

Signature of an officer or director

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.

Corporation Service Company

By: 

Signature of Registered Agent

07.24.15

Date

If signing on behalf of an entity:

Courtney Williams

Asst. Vice President

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

CR2E045 (03/12)

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