

FB00000 1734

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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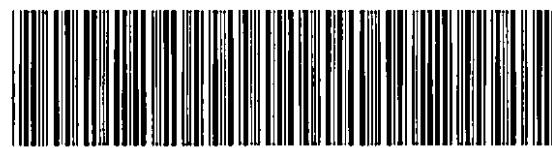
(Business Entity Name)

(Document Number)

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SHERIFF'S OFFICE  
TALLAHASSEE, FLORIDA

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## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Human Rights Defense Center  
Name of Corporation

DOCUMENT NUMBER: F13000001734

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:

Susan Schwartzkopf

Name of Contact Person

Human Rights Defense Center

Firm/Company

1028 N. Federal Highway

Address

Lake Worth, FL 33460

City/State and Zip Code

sschwartzkopf@prisonlegalnews.org

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

For further information concerning this matter, please call:

Susan Schwartzkopf

**Name of Contact Person**

at 1 561 360-2523

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 Washington \_\_\_\_\_ in order to change its registered office or registered agent, or both, in the State of Florida.*

1. The name of the corporation: Human Rights Defense Center

2. The principal office address: 1028 N. Federal Highway, Lake Worth, FL 33460

3. The mailing address (if different): Same

4. Date of incorporation/qualification: 4/22/13 Document number: F13000001734

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)

InCorp Services, Inc.

17888 67th Court North

Loxahatchee, FL 33470

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

Paul Wright

1028 N. Federal Highway

P O Box NO1 acceptable

Lake Worth, FL 33460

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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.

Paul Wright, Executive 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.*

1/9/2020

Date

Signature of Registered Agent

If signing on behalf of an entity:

Paul Wright

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  
CR21045 (04/13)

**FILED**