Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name : REGISTERED AGENT SOLUTIONS INC

Account Number : I20100000062 Phone : (888)705-7274 Fax Number : (888)706-7274

Email	Address:					_
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REGISTERED AGENT CHANGE PAGE SOUTHERLAND PAGE, INC.

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$35.00

1022 DEC -5 AM 11:

Electronic Filing Menu

Corporate Filing Menu

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COVER LETTER

TO:	Amendment Section			
	Division of Corporations			

SUBJECT: Page Southerland Page, Inc.	
Name of Corporation	
DOCUMENT NUMBER: F1400000227	
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:	
Mary Castillo	
Name of Contact Person	
Registered Agent Solutions, Inc.	
Firm/Company	20
Corporate Center One, 5301 Southwest Pkwy, Ste 400	22
Address	2022 DEC
Austin, Texas 78735	7
City/State and Zip Code	CT THE
E-mail address: (to be used for future annual report notification)	H 8: 50
For further information concerning this matter, please call:	
Mary Castillo Name of Contact Person at (888) 705-7274 Area Code & Daytime Telephone	
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** The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

CR2E045 (04/13)

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

statement of cha	provisions of sections 607,0502, 61 unge is submitted for a corporation of	organized under the l	aws of the Si	tate of Delawa	
	er to change its registered office or r the corporation: Page Southerl		oth, in the St	ate of Florida.	
1. The name of	the corporation: 1 age Coulifer	NA SHITE ONE	HOUST	ON TY 770	
2. The principal	office address: 1100 LOUISIA	INA SUITE ONE	10031	ON, 1X 770	<u> </u>
3. The mailing a	address (if different): 1800 Main	Street, Suite 12	23 Dallas	, TX 75201	
_	poration/qualification: 1/16/2014				27
5. The name and	d street address of the current register rtment of State: (If resigned, enter re	ered agent and registe			
	C T CORPORATION	SYSTEM			
	1200 SOUTH PINE ISLAND	ROAD			
	PLANTATION	FL	33324	· .	2022 DEC
6. The name and (if changed):	d street address of the new registered		nd/or regist	ered office	DEC -5
	Registered Agent Solu	utions, Inc.			AH
	155 Office Plaza Dr.	Suite A	,	·	დ.
	Tallahassee	P.O. Box NOT acceptable FL 3230)1	<u> </u>	Ō
The street address changed will	ess of its registered office and the s	street address of the b	ousiness offi	ce of its registe	red agent,
Such change wa authorized by the	as authorized by resolution duly ad he board, or the corporation has be	lopted by its board of en notified in writing	f directors or g of the chan	r by an officer s ige.	30
/s/ Catherin	ne J. Britt	Catherine	J. Britt	Chief Finan	icial Officer
I hereby accept I further agree of my duties, an document is bei	the appointment as registered age to comply with the provisions of al ad I am familiar with and accept th ing filed merely to reflect a change s been notified in writing of this ch	nt and agree to act i I statutes relative to e obligation of my po in the registered off ange.	n this capac the proper a ssition as re ice address,	ity. ind complete pe vistered avent.	Or. if this
		12/05/202			
_	mature of Registered Agent		Date		
	chalf of an entity:				
	Assistant Secretary Sped or Printed Name				
•		G FEE: \$35.00 * * *	•		

Frank Branch