# Florida Department of State

Division of Corporations **Electronic Filing Cover Sheet** 

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(((H150002773133)))



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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (850)205-8842 Fax Number : (850)878-5368

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

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## COR AMND/RESTATE/CORRECT OR O/D RESIGN **CHARON PLANNING CORPORATION**

Certificate of Status	0
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Page Count	04
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### **COVER LETTER**

TO: Amendment Section Division of Corporations	
Charon Planning Corporation SUBJECT:	
Name	of Corporation
DOCUMENT NUMBER:	
The enclosed Amendment and fee are subm	itted for filing.
Please return all correspondence concerning	this matter to the following:
Mark Richter	
Name of Contact Person	
NFP Corp	
Firm/Company	
1250 S Cap of TX HWY, Bldg 2, Suite 125	
Address	The state of the s
Austin, TX 78746	
City/State and Zip Code	
dhrankaj@nfp.com	
E-mail address: (to be used for future annu	nal report notification)
For further information concerning this mat	ter, please call:
Darlene Hrankaj	312 985-5133 at ( )
Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a check for the following amount	nt:
\$35.00 Filing Foo S43.75 Filing Fee & Certificate of Status	\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)  \$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)
Mailing Address: Amendment Section	Street Address: Amendment Section
Division of Corporations	Division of Corporations
P.O. Box 6327 Tallahassee, FL 32314	Clifton Building 2661 Executive Center Circle
1 ananassee, FL 32314	Tallahassee, FL 32301

#### PROFIT CORPORATION APPLICATION BY FOREIGN PROFIT CORPORATION TO FILE AMENDMENT TO APPLICATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

(Pursuant to s. 607.1504, F.S.)

SECTION 1 (1-3 must be completed)
1000006 220

Charon Planning Corporation (Name of corporation as it appears on the records of the Department of State) New Jersey (Incorporated under laws of) (Date authorized to do business in Florida) **SECTION II** (4-7 COMPLETE ONLY THE APPLICABLE CHANGES) 4. If the amendment changes the name of the corporation, when was the change effected under the laws of its jurisdiction of incorporation? 9/17/2015 5. NFP Corporate Services (PA), Inc. (Name of corporation after the amendment, adding suffix "corporation," "company," or "incorporated," or appropriate abbreviation, if not contained in new name of the corporation) (If new name is unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida) 6. If the amendment changes the period of duration, indicate new period of duration. (New duration) 7. If the amendment changes the jurisdiction of incorporation, indicate new jurisdiction. (New jurisdiction) 8. Attached is a certificate or document of similar import, evidencing the amendment, authenticated not more than 90 days prior to delivery of the application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the laws of which it is incorporated. (Signature of a director/ president of other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary) Suzanne Spradley (Typed or printed name of person signing) (Title of person signing)

11/20/2015 10:09:12 AM From: To: 8506176380( 4/4 )

# STATE OF NEW JERSEY DEPARTMENT OF TREASURY CERTIFICATE OF NAME CHANGE

#### NFP CORPORATE SERVICES (PA), INC.

I, the Treasurer of the State of New Jersey, do hereby certify, that on September 17,2015, a name change certificate was duly filed in this office, changing the business name from Charon Planning Corporation to:

NFP Corporation Services (PA), Inc.



IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed my Official Seal at Trenton, this 19th day of November, 2015

Certificate Number: 137670473

Verify this certificate online at

https://www1.state.nj.us/TYTR\_StandingCert/JSP/Verify\_Cert.jsp

Joel M. Friller

Ford M Scudder Treasurer