

## Florida Department of State

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

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

Email Address:\_\_

### REGISTERED AGENT CHANGE CHOICE SOLUTIONS SERVICES, INC.

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#### COVER LETTER

TO:

Amendment Section Division of Corporations

SUBJECT: CHOICE SOLUTIONS SERVICES, INC.

Name of Corporation

DOCUMENT NUMBER. F16000002094

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

1701 Directors Blvd, Ste 300

Address

Austin, TX 78744

City/State and Zip Code

notices@rasi.com

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

For further information concerning this matter, please call:

Mary Castillo

Name of Contact Person

,888

705-7274

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

⊙ 08/24/2018 1:17 PM

#### H180002491523

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

→ 18506176380

statement of cha	nge is submitted	d for a corporation o	.0502, 607.1508, or 617.150 rganized under the laws of t gistered agent, or both, in th	he State of ]	ΓEXAS		
			LUTIONS SERV		NC.		
2. The principal	office address:	2460 NORTH CE	NTRAL EXPRESSW	AY		<del></del>	
RICHA	RDSON,	TX_	75080				
3. The mailing a	ddress (if differ	rent):					
4. Date of incorp	poration/qualific	cation: 05/06/20	Document number	F160	0000	2094	
		of the current register (If resigned, enter res	ed agent and registered officigned)	ce on file wi	th the		
	CORPO	RATION SEF	RVICE COMPAN	Υ			
	1201 HA	YS STREET			٤s	2(	
	TALLAH	ASSEE, FL 3	32301-2525		TAL.	)18 AL	
<ol><li>The name and street address of the new registered agent (if changed) and /or reg (if changed):</li></ol>				egistered off	LAHAS	2018 AUG 24	
	Registered	Agent Solution	is, Inc.	<del></del>	OF S	AH S	
	155 Office	Plaza Dr., Suite			FAT	9: 27	
	Tallahasse	Р.О. Вох e, FL 32301	NOT acceptable		•		
The street addre	ess of its registe be identical.	red office and the st	reet address of the business	office of its	register	ed agen	i <b>t</b> ,
Such change wa authorized by th	is authorized by ne board, or the	resolution duly ado corporation has been	pted by its board of directo i notified in writing of the o	rs or by an o change.	officer so	<b>&gt;</b>	
/S/ Mark Bus			Mark Burnam			ident	
I hereby accept I further agree to performance of agent, Or, if thi	to comply with a my duties, and is documents l	nt as registered agen the provisions of all. I am familiar with a being filed merely to	t and agree to act in this cost statutes relative to the prop nd accept the obligation of reflect a change in the reg ed in writing of this change	per and comp my position islered office	olete as revis	tered s, I	
C	nature of Registered	Acres	08/23/2018	ate			
If signing on be	H	-	ם	-BLC			
		tant Secretary					
T	yped or Printed Name	•					