

(CT 02 201)

## COVER LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: The Woodmont Company  
Name of Corporation

DOCUMENT NUMBER: F16000003531

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:

Dory Thedford  
Name of Contact Person

The Woodmont Company  
Firm/Company

2100 W. 7th St.  
Address

Fort Worth, TX 76107  
City/State and Zip Code

dthedford@woodmont.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Dory Thedford at ( 817 ) 377-7709  
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 Florida in order to change its registered office or registered agent, or both, in the State of Florida.*

1. The name of the corporation: The Woodmont Company
2. The principal office address: 2100 W. 7th St.  
Ft. Worth, TX 76107
3. The mailing address (if different): \_\_\_\_\_
4. Date of incorporation/qualification: 8/8/16 Document number: F16000003531

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)

Stephen Coslik/Cogency Global, Inc.

115 N. Calhoun St., #4

Tallahassee, FL 32301

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

Daniel B. Thompson

1305 Roxbury Dr.

P.O. Box NOT acceptable

Safety Harbor, FL 34695

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.

Stephen Coslik  
Signature of an officer or director

9/27/17  
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.*

Daniel B. Thompson  
Signature of Registered Agent

9/27/17  
Date

If signing on behalf of an entity:

\_\_\_\_\_  
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)

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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