## F20000000327

(R	equestor's Name)	
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	ddress)	
(Ci	ity/State/Zip/Phone #)	
PICK-UP	☐ WAIT ☐ MAIL	
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RARUCHS

NOV 2 2 2021 I ALBRITTON

CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE :

AUTHORIZATION

COST LIMIT

ORDER DATE: November 18, 2021

ORDER TIME : 2:30 PM

ORDER NO. : 256419-005

CUSTOMER NO: 8361395

## CHANGE OF AGENT

NAME: THE GLOBAL ORPHAN PROJECT, INC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

\_ CERTIFIED COPY XX PLAIN STAMPED COPY

CONTACT PERSON: Eyliena Baker

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

statement of cha	inge is submitted for a corpora	2, 617.0502, 607.1508, or 617.1508, Florida Statutes, ition organized under the laws of the State of <u>MO</u> e or registered agent, or both, in the State of Florida.	this
1. The name of	the corporation: THE GLOBAL	ORPHAN PROJECT, INC	
		OTTE ST, KANSAS CITY, MO 64111	
3. The mailing a	address (if different):		
4. Date of incor	poration/qualification: 07/16/2	Document number; F20000003271	
	d street address of the current re rtment of State: (If resigned, er	egistered agent and registered office on file with the nter resigned)	
	CT CORPORATION SYSTE	EMS	26
	1200 S PINE ISLAND RD		20211557 19
	PLANTATION, FL 33324		5
6. The name and street address of the new registered agent (if changed) and /or registered off (if changed):		stered agent (if changed) and /or registered office	AH 9:
	Corporation Service Compa	ny	ca ca
	1201 Hays Street		
		P.O. Box NO l'acceptable	
	Tallahassee	FL 32301	
The street address changed will	ess of its registered office and be identical.	the street address of the business office of its registe	ered agent.
Such change was authorized by the	as authorized by resolution du ne board, or the corporation ha	ly adopted by its board of directors or by an officer as been notified in writing of the change.	so
	Ziu E Cienii	Jill Cilmi, Vice President	
Signatu		Printed or typed name and title	
I further agree of my duties, an document is bei corporation has	the appointment as registered to comply with the provisions and I am familiar with and acceing filed merely to reflect a chis been notified in writing of the Service Company	d agent and agree to act in this capacity, of all statutes relative to the proper and complete poper the obligation of my position as registered agent, ange in the registered office address, I hereby confinits change.	erformanc Or, if thi rm that the
<u>Ву: Д</u>	nee Cokuble	11/19/2021	
	mature of Registered Agamt	Date	
If signing on be	chalf of an entity:		
<del></del>	Asst. Vice President		
Т	yped or Printed Name		
	* * * T? I	II INC EEE, 626 AA + + +	

\* \* \* 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 (04/13)