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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (614)280-3338 Fax Number : (614)573-3996

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

Email Address:						
	Email:	Addnoce	c ·			

## REGISTERED AGENT CHANGE NAHT/SAHF AFFORDABLE HOUSING COMMUNITIES 2019-1, INC

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	S43.75

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

1. The name of	the corporation: NAHT/SAHF Affo	rdable Housing Communities 2019-1 Inc	
2. The principa	d office address: 330 Rush Alley, Suit	te 620, Columbus OH 43215	
3. The mailing	address (if different):		
4. Date of inco	rporation/qualification: 04/22/2021	Document number: F2100000218	7
5. The name a		tered agent and registered office on file with the	
	Cogency Global, Inc.		
	114 North Calboun Street, Suite 4		
	Tallahassec, FL 32301		202 TA
6. The name a (if changed		ed agent (if changed) and for registered office	2024 APR 10
	C T Corporation System		
	1200 South Pine Island Road		PH
	Plantation, Florida 33324	P.O Box NOT acceptable	: 30
The street ade	dress of its registered office and the ill be identical.	e street address of the business office of its re	gistered agen
Such change authorized by	was authorized by resolution duly a the board, or the corporation has b	adopted by its board of directors or by an off been notified in writing of the change.	icer so
	alure of an officer or director	David S. Michaels, Secretary Printed or typed name and title	
I hereby acce I further agre of my duties, document is corporation	pt the appointment as registered as te to comply with the provistons of and I am familiar with and accept being filed merely to reflect a charg has been notified in writing of this c	gent and agree to act in this capacity, all statutes relative to the proper and compl the obligation of my position as registered a ge in the registered office address, I hereby o change.	ete performan gent. Or, if th confirm that th
C T Corporat	ion System.	04/03/2024	
Microse	Signature of Registered Agent	Date	
If signing on	behalf of an entity: Mark Holloway,		

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E(45 (04/13)