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(Requestor's Name)

(Address)

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(City/State/Zip/Phone #)

☐ PICK-UP

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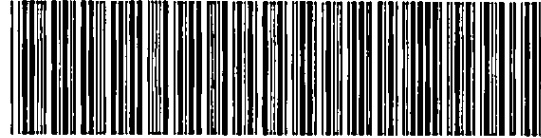
(Business Entity Name)

(Document Number)

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September 6, 2022



GUTWEINLAW.COM

Florida Dept. of State  
Amendment Section  
Division of Corporations  
PO Box 6327  
Tallahassee, FL 32314

Re: Statement of Change of Registered Office or Registered Agent or both for  
Corporations

To Whom it May Concern:

Please find enclosed a Cover Letter, Statement of Change of Registered Office or Registered Agent or both for Corporations, and a check in the amount of \$35.00 payable to the Florida Department of State, all submitted on behalf of Crisis Response Leader Training, Inc., an Indiana corporation. Should you have any questions regarding this matter, please contact me at (317) 777-7923.

Sincerely,  
GUTWEIN LAW

Marita L. Carnes, Paralegal  
MLC/mlc  
Encl.

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Crisis Response Leader Training, Inc.  
Name of Corporation

**DOCUMENT NUMBER:** F22000002311

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:

Marita Carnes

Name of Contact Person

GUTWEIN LAW

Firm/Company

200 S. Meridian St, Suite 420

Address

Indianapolis, IN 46225

City/State and Zip Code

ers@gutweinlaw.com

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

For further information concerning this matter, please call:

Marita Carnes

Name of Contact Person

at (317) 777-7923

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  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

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**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 Indiana in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Crisis Response Leader Training, Inc.
2. The principal office address: 140 Frontage Road, Suite C  
Lafayette, IN 47905
3. The mailing address (if different): \_\_\_\_\_
4. Date of incorporation/qualification: 4/14/2022 (FL) Document number: F22000002311
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)  
Spencer Hamm  
932 Iris Lake Dr., Apt. 103  
Tampa, FL 33619
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):  
Cogency Global, Inc.  
115 North Calhoun Street, Suite 4  
P.O. Box NOT acceptable  
Tallahassee, FL 32301

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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.

DocuSigned by:  
Tod Langley Signature of authorized officer  
Signature of authorized officer  
Tod Langley, President  
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.*

/s/ Shannon M. Maddox 08/15/2022  
Signature of Registered Agent Date

If signing on behalf of an entity:

Shannon M. Maddox, Asst. Secretary Cogency Global Inc.  
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 (04/13)