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 : C T CORPORATION SYSTEM

Account Number : FCA000000023

Fax Number

Phone : (850) 222-1092 : (850)878-5368

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

Rmail .	Address:			

REGISTERED AGENT CHANGE INDEPENDENT PURCHASING COOPERATIVE, INC.

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\$35.00

Electronic Filing Menu

Corporate Filing Menu

Help

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https://efile.sunbiz.org/scripts/efilcovr.exe

11/20/2014

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COVER LETTER

10.	Division of Corporations
SUBJ	ECT:Name of Corporation
DOCU	IMENT NUMBER:
The en	closed Statement of Change of Registered Office/Agent and fee are submitted for filing.
Please	return all correspondence concerning this matter to the following:
	•
	Name of Contact Person
	INDEPENDENT PURCHASING COOPERATIVE, INC.
	Flrm/Company
	9200 S Dadeland Blvd # 705
	Address
	Miami, FL 33156
	City/State and Zip Code
	jfernandez@ipcoop.com
	E-mail address: (to be used for future annual report notification)
For fur	ther information concerning this matter, please call:
	•
	Name of Contact Person Area Code & Daytime Telephone Number
	The South Supplies Halling
Enclose	ed is a \$35.00 check made payable to the Department of State.
	Mailing Address: Street Address:
	Mailing Address: Street Address: Amendment Section Amendment Section
	Division of Corporations Division of Corporations
	P.O. Box 6327 Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

CR2E045 (03/12)

P.O. Box 6327 Tallahassee, FL 32314

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

	provisions of sections 607.0502, 617.050 unge is submitted for a corporation orga	02, 607.1508, or 617.1508, Florida Statutes, this nized under the laws of the State of DE
		tered agent, or both, in the State of Florida.
	the corporation: Independent Purchasing C	•
5 m - 1 1-1	office address; 9200 S. DADELAND BL	VD. #705 MIAMI, FL 33156
2. The principal	office address;	
3. The mailing a	address (if different):	
4. Date of incom	poration/qualification: B/14/1998	Document number: F9800004640
5. The name and		agent and registered office on file with the ed)
	FERNANDEZ, JOSE	
	9200 S. DADELAND BLVD. #705 MIAN	иі, FL 33156
6. The name and (if changed):	I street address of the new registered age	ant (if changed) and /or registered office
	C T Corporation System	
	c/o C T Corporation System, 1200 South I	
	Plantation, Florida 33324	
The street address changes will	ess of its registered office and the street be identical.	address of the business office of its registered agent,
Such change we authorized by the	as authorized by resolution duly adopted the board, or the corporation has been no	d by its board of directors or by an officer so stifled in writing of the change.
Vh.	1th	Rina Danielson VP
	is official and inschar	Printed or typed mains and title
		d agree to act in this capacity, utes relative to the proper and complete accept the obligation of my position as registered ect a change in the registered office address, I n writing of this change.
By: C Tobr	portation/System	11/20/14
- 9	send of Registered Apart	Date
If signing on be	half of an entity:	
Assisi	ant Secretary	

* * * 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)