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C. CARROTHERS

## **COVER LETTER**

TO:	Amendment Section Division of Corporations		
SUBJI	MULTIPAR INC.		
	Name of C	Corporation	
DOCL	JMENT NUMBER:	<del>-</del>	
The en	nclosed Statement of Change of Registered Office	ce/Agent and fee ar	e submitted for filing.
Please	return all correspondence concerning this matter	er to the following:	
	Steven J. Rusincovitch		
	Name of Co	ntact Person	<del></del>
	Furman's, Inc.		
	Firm/C	ompany	<del></del>
	1663 Mound Street		
	Add	lress	
	Sarasota, Florida 34236		
	City/State a	nd Zip Code	
	stever@furmansinc.com		
	E-mail address: (to be used for f	future annual repo	ort notification)
For fu	rther information concerning this matter, please	call:	
Steven	J. Rusincovitch	941 at (	365-7891
	Name of Contact Person	Area Code &	2 Daytime Telephone Number
Enclos	sed is a \$35.00 check made payable to the Depar	tment of State.	
	Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Divisio Clifton	address: ment Section n of Corporations Building xecutive Center Circle
		Tallaha	ssee, FL 32301

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CR2E045 (03/12)

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

	e provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statute		•
	cange is submitted for a corporation organized under the laws of the State of <u>Plotide</u> ler to change its registered office or registered agent, or both, in the State of Florido		_
1. The name of	the corporation: Multipar Inc.	<del> </del>	
2. The principa	al office address: 1663 Mound Street, Sarasota, FL 34236		
3. The mailing	address (if different):		
4. Date of inco	rporation/qualification: 12/19/1986 Document number: 148041		<del></del>
5. The name ar	and street address of the current registered agent and registered office on file with the artment of State: (If resigned, enter resigned)		
	FURMAN, ROBERT GPDT	73 cr	22
	1663 Mound Street,	THE T	S APR
	Sarasota, FL 34236	35	<b>(</b>
6. The name an (if changed):	nd street address of the new registered agent (if changed) and /or registered office	E FLORI	₩ 60
	C T Corporation System	150	PO
	c/o C T Corporation System, 1200 South Pine Island Road		
	P.O. Box NOT acceptable		
	Plantation, Florida 33324		
The street addr as changed wil	ress of its registered office and the street address of the business office of its regis I be identical.	tered ag	ent,
Such change wanthorized by	vas authorized by resolution duly adopted by its board of directors or by an officer the board, or the corporation has been notified in writing of the change.	· \$0	
\\M_1	Robert G. Furman, President		_
I hereby accep I further agree performance o agent. Or, if the hereby confirm	the appointment as registered agent and agree to act in this capacity, to comply with the provisions of all statutes relative to the proper and complete fmy dulies, and I am familiar with and accept the obligation of my position as rests document is being filed merely to reflect a change in the registered office addit that the corporation has been notified in writing of this change.  The control of the provision of the property of the propert	gistered ess, I	
By: 9	grature of Registored Agent Date	···	
	ehalf of an entity:		
T.	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)