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M. MILLIGAN OUT 12 2017

COVER LETTER .

Divi	sion of Corporations				
SUBJECT:	Crisis Management Associates				
SUBJECT.	Name of Limited Liability Company				
Dear Sir or N	Madam:				
The enclosed	d Registered Agent/Registered Off	ice Change and	fee(s) are submitted for filing.		
Please return	all correspondence concerning th	is matter to the	following:		
John Jose	ph Jordan				
	Name of Person		_		
Crisis Mar	nagement Associates				
	Firm/Company		_		
1123 Morg	gan Circle East				
	Address				
Orange Pa	ark, FL 32073				
	City/State and Zip Code				
-	@crisismgt.org		_		
	address: (to be used for future ann	•	cation)		
For further is	nformation concerning this matter.	please call:			
John J. Jo	rdan	904 at (993-2690		
	Name of Person		Area Code & Daytime Telephone Number		
	REET/COURIER ADDRESS: istration Section		MAILING ADDRESS: Registration Section		
	sion of Corporations ton Building		Division of Corporations P.O. Box 6327		
	Executive Center Circle	Tallahassec, Florida 32314			
Talla	ahassee, Florida 32301				
Enc	losed is a check for the following	amount:			
2 S	25 Filing Fee	□ \$5	5 Filing Fee & Certified Copy		

TO: Registration Section

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. N	ame of the limited liability company: Crisis Manag	ement Associa	ites		
2. (a)	1123 Morgan Circle East	(b) 1123	(h) 1123 Morgan Circle East		
2. (4)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)		
	Orange Park, FL 32073-3962	Orang	ge Park, FL 32073-3962		
	07/31/2006	L06000	0075513		
3.	Date of filing/registration in Florida	4.	Document number		
5. (a)	John J. Jordan				
• •	Registered Agent and Registered Office shown on the records of	the Florida Dept. of S	State:		
	2465 Begonia Drive				
	Registered Office Address (MUST BE FLORIDA STREET	<u>ADDRESS)</u>	30 V		
	Middleburg . FI	32068	AT OCT 10 AH 9: 19		
	John L Jordon		H 900 F		
(b)	John J. Jordan Enter name of NEW Registered Agent and/or NEW Registered	l ()(Gas addraw)	9: 19		
	Enter hame of NEW Registered Agent and/or NEW Registered	Office address.	<u> </u>		
	1123 Morgan Circle East				
	NEW Registered Office Address:				
	Orange Park	32073			
	·				
the cha agent was/w	limited liability company is not organized under the la ange or changes are made, the Florida street address o will be identical. Or, in the case of a Florida limited li ere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the	f the registered of lability company, of the limited liab limited liability of	fice and the business office of the registered it is hereby confirmed that the change(s) ility company or as otherwise provided in		
Signa	nture of a member or authorized representative of a member		Printed or typed name of signee		
provis the ob- to mer notifie	by accept the appointment as registered agent and agions of all statutes relative to the proper and complete ligations of my position as registered agent as providerly reflect a change in the registered office address. If a configuration of this change.	ree to act in this control of its performance of its defendance of its defendance of the confirm the confirmation of the confirmat	capacity. I further agree to comply with the ny duties, and I am familiar with and accept 605, F.S. Or, if this document is being filed hat the limited liability company has been		
Signat	fre of Registered Agent				