## 090100c

(Requestor's Name)						
(Address)						
(Address)						
(City/State/Zip/Phone #)						
PICK-UP WAIT MAIL						
(Business Entity Name)						
(Document Number)						
Certified Copies Certificates of Status						
Special Instructions to Filing Officer:						
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Account#: 120000000088 March 11, 2022 Date:\_ **David Shulman** Name:\_\_\_ 1602811 Reference #:\_\_\_\_ STEP UP FOR STUDENTS-FLORIDA, INC. Entity Name: Articles of Incorporation/Authorization to Transact Business Amendment Change of Agent **ISSUES? CALL** Reinstatement David: 850-270-0082 Conversion Merger Dissolution/Withdrawal Trictitious Name Other \_\_\_\_\_\_ Authorized Amount: \$35.00 David Shulman Signature:



115 N CALHOUN ST., STE. 4 TALLAHASSEE, FL 32301 **866.625.0838** COGENCYGLOBAL.COM

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Signature:

-44 (0)20.3786.1090

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

statement of cha	provisions of sections 607.05 inge is submitted for a corpo	ration organize	d under the law	s of the State	of	
in orde	r to change its registered off	ice or registere	d agent, or both	, in the State	of Florida.	
1. The name of the corporation: STEP UP FOR STUDENTS-FLORIDA, INC.						
2. The principal	office address: 4655 SAL	ISBURY RO	AD, SUITE 4	00, JACK	SONVILLE, FL, 32256	
3. The mailing a	address (if different):					
4. Date of incorp	poration/qualification:	2/18/2000	Document n	umber:	N00000001090	
	d street address of the current treet of State: (If resigned,		nt and registered	l office on fil	e with the	
	PFC	DUNTZ, JOS	EPH E		<del></del>	
	4655 Salisbury Road, SUITE 400				_	
	JACKSONVILLE,	FL, 3225	6		2022 HAR	
6. The name and (if changed):	street address of the new re	gistered agent (i	f changed) and	/or registered	d office =	
	COG	ENCY GLOB	AL INC.		<u> </u>	
	115 North Calhoun Street, Suite 4					
	Tallahasse	P.O. Box NOT acco	թահե Florida	32301		
The street address changed will	ess of its registered office an be identical.	<del></del>			— of its registered agent,	
_	is authorized by resolution d ie board, or the corporation l					
_ (Ils)	re of an officer or director		ANNE G	PHITE	CAO	
I hereby accept I further agree to performance of agent. Or, if thi hereby confirm  Sign	the appointment as registers to comply with the provision my duties, and I am familiants document is being filed methat the corporation has been sature of Registered Agent half of an entity:	s of all statutes with and acce	relative to the	proper and o	tion as revistered	
<i>C C</i>	•					
Ty	ped or Printed Name	<del></del>				

\* \* \* FILING FEE: \$35.00 \* \* \*