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				7 †-
RPORATION SERVICE COMPANY				
(contract	ACCOUNT NO.	: 07210	0000032	
	REFERENCE	: 32105	7394358	
	AUTHORIZATION			
	COST LIMIT	: 35.	Kenan	
ORDER DATE :	November 15, 200	7		
ORDER TIME :	9:43 AM			
ORDER NO. :	321056-085			
CUSTOMER NO:	7394358			
	CHANGE OF A	<u>GENT</u>		
NAME:	ASTOR LODGE N LOYAL ORDER O			

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

INC.

CERTIFIED COPY
XX PLAIN STAMPED COPY

CONTACT PERSON: Debbie Skipper -- EXT# 2948

EXAMINER:

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

statement of cha	provisions of sections 607.0502, 617.0502 inge is submitted for a corporation organi or to change its registered office or registe	
1. The name of t	the corporation: ASTOR LODGE NO. 255	2, LOYAL ORDER OF MOOSE, INC.
	office address: 54750 CR 445A, Astor, FL	
3. The mailing a	address (if different): P. O Box 900, Astor,	FL 32102
4. Date of incorp	poration/qualification: 04/11/2000	Document number: N00000002522
	I street address of the current registered ag thent of State:	
	John D. Miller	TER DELL'A
	54750 C R 445 A	
	Astor, FL 32102	NON 19 PA
6. The name and (if changed):	I street address of the new registered agen	
	Corporation Service Company	
	1201 Hays Street	
	(P.O. Box NOT acceptable)	
	Tallahassee, FL 32301	
The street addre	ess of its registered office and the street a be identical.	address of the business office of its registered agent,
Such change wa authorized by th	as authorized by resolution duly adopted he board, or the corporation has been not	by its board of directors or by an officer so ified in writing of the change.
Maure	a Callera -	Maureen Cullen, Attorney In Fact
I further agree to of my duties, an document is bei corporation has	the appointment as registered agent and to comply with the provisions of all state and I am familiar with and accept the obling filed merely to reflect a change in the seen notified in writing of this change.	(Printed or typed name and title) If agree to act in this capacity, the street to the proper and complete performance agation of my position as registered agent. Or, if this is registered office address, I hereby confirm that the
By: Wu	serwice Company	(Date)
	chalf of an entity:	
Michelle R. Van	noy, Assistant Vice President	
(T	Typed or Printed Name)	

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