N0100006436

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Requester's Name	1 ,
CATHEDRAL SQUARE-THC, INC. 8159 ARLINGTON EXPRESSWAY, JACKSONVILLE, FL 32211	SUITE 28
City/State/Zip Phone #	
	Office Use Only
CORPORATION NAME(S) & DOCUM	MENT NUMBER(S), (if known):
1. (Corporation Name)	(Document #)
ว	
(Corporation Name)	(Document #) 3000078423834 -09/19/0201022006 *****35.00 *****35.00
3. (Corporation Name)	(Document #)
4. (Corporation Name)	(Document #)
☐ Walk in ☐ Pick up time _	Certified Copy
☐ Mail out ☐ Will wait	Photocopy
NEW FILINGS	AMENDMENTS PAR PR
Profit Not for Profit Limited Liability Domestication Other	AMENDMENTS Amendment Resignation of R.A., Officer/Director Change of Registered Agent Dissolution/Withdrawal Merger AMENDMENTS FILED FIL
OTHER FILINGS	REGISTRATION/QUALIFICATION
Annual Report Fictitious Name	Foreign Limited Partnership Reinstatement Trademark Other PAIRO P
	Everniner's Initials

CR2E031(7/97)

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

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, the
undersigned corporation organized under the laws of the State of 7/6 E104
submits the following statement in order to change its registered office or registered agent, or both, in the
State of Florida. 1. The name of the corporation: Catheoral Square - THC, INC
1. The name of the corporation:
2. The mailing address of the corporation: 8159 ARLington Expression
Ste 28, JACKSmoille, 21 32246
3. Date of incorporation/qualification: Document number: No 1 60000 6436
4. The name and address of the current registered agent and registered office:
(Stephen) STEVE B. Prom
50 North LAURA STREET STE 2500 Per 8
5. The name and address of the new registered agent (if changed) and /or registered office (if changed)
M. Cent Ceislen
12907 DEED LAGOON PLACE SAST
JACIEVANV. 11c Floreion, 32246
The street address of its registered office and the street address of the business office of its registered agent, as changed, will be identical.
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board.
Cut Suoles 9/15/or
(Signature of an officer, chairman or vice chairman of the board) (Date)
CURT GEISLEY PRES. DENT/CES (Printed or typed name and title)
Having been named as registered agent and to accept service of process for the above stated corporation, I hereby accept the appointment as registered agent and agree to act in this capacity.
corporation, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as
registered agent
(int Set
(Signature of Registered Agent) (Date)
If signing on behalf of an entity:
CURT GEIS Mendet / CEO (Typed or Printed Name) (Capacity)
(

CR2E045(8/99)

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