

N03000004318

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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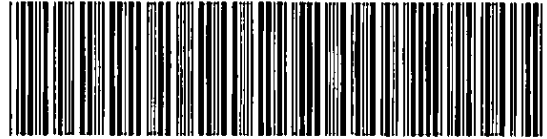
(Business Entity Name)

(Document Number)

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: OES Rescue Network of the Southeast, Inc
Name of Corporation

DOCUMENT NUMBER: N03000004318

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Fiona Bowen, Vice President

Name of Contact Person

OES Rescue Network of the Southeast, Inc

Firm/Company

5146 Allison Way

Address

Sugar Hill, GA 30518-5974

City/State and Zip Code

fionarb@aol.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Carolyn Vaisin, Treasurer

Name of Contact Person

at (251) 923-8940

Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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

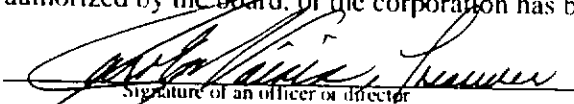
Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: OES Rescue Network of the Southeast, Inc.
2. The principal office address: 18315 Owl Drive
Lutz, FL 32548
3. The mailing address (if different): c/o Fiona Bown
5146 Allison Way, Sugar Hill, GA 30518
4. Date of incorporation/qualification: May 22, 2003 Document number: N03000004318
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)
Carolyn Vaisin
12878 Saddlebrook Circle
Fairhope, AL 36532-7707
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Karen Burdash
18315 Owl Drive
Lutz, FL 33548

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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, or the corporation has been notified in writing of the change.


Signature of an officer or director

Carolyn Vaisin, Treasurer
Printed or typed name and title

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. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

x 
Signature of Registered Agent

September 30, 2019
Date

If signing on behalf of an entity:

KAREN BURDASH
Typed or Printed Name

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