

NO60000007938

REQUEST ORIGINAL FILING DATE OF 5-8-2019

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Florida Department of State
 Division of Corporations
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To:

Division of Corporations
 Fax Number : (850) 617-6380

From:

Account Name : SHUTTS & BOWEN, LLP
 Account Number : 076447000313
 Phone : (305) 358-9166
 Fax Number : (305) 347-7766

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: MLozoff@shutts.com

REGISTERED AGENT CHANGE
CUSAVERS, INC.

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$35.00

RECEIVED

2019 MAY -9 AM 11:12

SECRETARY OF STATE
TALLAHASSEE, FLORIDASECRETARY OF STATE
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19 MAY -9 AM 12:45

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MAY 10 2019

T. SCHROEDER

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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 CUSAVERS, INC.
 2. The principal office address 711 E. Henderson Avenue, Tampa, Florida 33602
 3. The mailing address (if different): _____

4. Date of incorporation/qualification 07/26/2006 Document number N06000007938
 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)

Marie CampbellPOST OFFICE BOX 172599Tampa, FL 33602-2509

6. The name and street address of the new registered agent (if changed) and for registered office (if changed).

Corporation Company of Miami200 S. Biscayne Blvd, Ste 4100 (MDL)Miami, Florida 33131

P.O. Box NOT acceptable

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]
 Signature of an officer or director

Brad Baker FVE/2FC
 Printed name of officer or director

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.

[Signature]
 Signature of Registered Agent

5/7/19
 Date

If signing on behalf of an entity

Alfred G. Smith, President
CORPORATION COMPANY OF MIAMI, INC.
 Typed or Printed Name

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
 MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

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SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

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