

Note 000013088

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

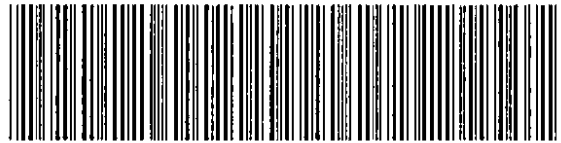
(Business Entity Name)

(Document Number)

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COGENCYGLOBAL

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

Date: **May 14, 2020**

Account#: 120000000088

Name: **KEN HOWELL**

Reference #: **1220290**

Entity Name: **COSTELLO FAMILY FOUNDATION, INC.**

☐ Articles of Incorporation/Authorization to Transact Business

☐ Amendment

☒ **Change of Agent**

☐ Reinstatement

☐ Conversion

☐ Merger

☐ Dissolution/Withdrawal

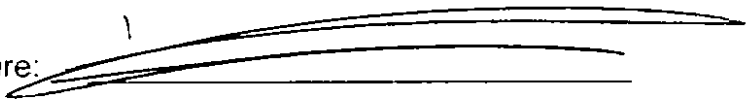
☐ Fictitious Name

☒ Other

PLEASE RETAIN FILE DATE OF 5/13/2020 **

**ISSUES? CALL
KEN:
518-213-0738**

Authorized Amount: **\$35.00 — ALREADY DELETED**

Signature: 



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KEN:
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Authorized Amount: **\$35.00**

Signature: _____



FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 14, 2020

COGENCY

SUBJECT: COSTELLO FAMILY FOUNDATION, INC.
Ref. Number: N06000013088

We have received your document for COSTELLO FAMILY FOUNDATION, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The signature of the officer/director is illegible and not acceptable for imaging.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Terri J. Schroeder
Regulatory Specialist III

Letter Number: 120A00009811

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: COSTELLO FAMILY FOUNDATION, INC.
Name of Corporation

DOCUMENT NUMBER: N06000013088

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:

ADRIANNA LIGHT

Name of Contact Person

DUGGAN BERTSCH, LLC

Firm/Company

303 WEST MADISON, SUITE 1000

Address

CHICAGO, ILLINOIS 60606

City/State and Zip Code

DLITTWIN@DUGGANBERTSCH.COM

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

For further information concerning this matter, please call:

ADRIANNA LIGHT

Name of Contact Person

at (312) 263-8600

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: COSTELLO FAMILY FOUNDATION, INC.
2. The principal office address: 6300 RIVERSIDE DRIVE
PARKLAND, FL 33067
3. The mailing address (if different): 2001 BUTTEFIELD ROAD, SUITE 1750
DOWNERS GROVE, ILLINOIS 60515
4. Date of incorporation/qualification: 12/26/2006 Document number: _____
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)

CT CORPORATION SYSTEM C/O CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FLORIDA 33324

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

COGENCY GLOBAL, INC.
115 NORTH CALHOUN STREET, SUITE 4
P.O. Box NOT acceptable
TALLAHASSEE, FLORIDA 32301

2020 MAY 13 AM 7:27
TALLAHASSEE, FL
STATE DEPT. OF STATE
CORPORATION DIV.

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

MICHAEL J. COSTELLO PRES.

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.



Signature of Registered Agent

5-12-2020

Date

If signing on behalf of an entity:

Sandra Omorogbola

Typed or Printed Name

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