

200298970532

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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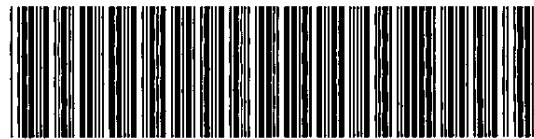
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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200298970532

05/30/17--01008--025 **35.00

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JUN 06 2017

R. WHITE

**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: Rotary Charities of North Jacksonville
2. The principal office address: _____

3. The mailing address (if different): PO Box 16445
Jacksonville, FL 32245

4. Date of incorporation/qualification: 10-19-2007 Document number: NO 7000010296

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)

Wayne R. Compton
7436 Lem Turner Rd
Jacksonville, FL 32208

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

Del C. Brooks, Jr.
12789 Muirfield Blvd. No.
P.O. Box NOT acceptable
Jacksonville, FL 32225

17 MAY 30 PM 5:21

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.

Karl E. Lawhon
Signature of an officer or director

Karl E. Lawhon
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.

Del C. Brooks Jr
Signature of Registered Agent

May 19, 2017
Date

If signing on behalf of an entity:

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

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Rotary Charities of North Jacksonville
Name of Corporation

DOCUMENT NUMBER: NO7000010296

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:

DEL C. BROOKS, JR.
Name of Contact Person

Firm/Company

12789 MURFIELD BLVD. N.
Address

JACKSONVILLE, FL 32225
City/State and Zip Code

DELKAREN64@COMCAST.NET
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

DEL BROOKS at (904) 564-9318
Name of Contact Person 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