

N110000001503

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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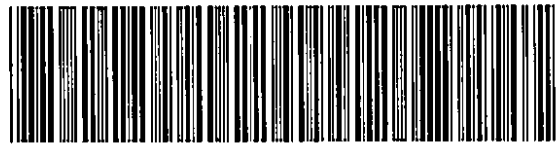
(Business Entity Name)

(Document Number)

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DIVISION OF CORPORATIONS  
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SECRETARY OF STATE  
DIVISION OF CORPORATIONS

2010 JUL 27 AM 11:44

TO: Amendment Section  
Division of Corporations

SUBJECT: MORADA WAY ARTS AND CULTURAL DISTRICT, INC.  
Name of Corporation

DOCUMENT NUMBER: N110000001503

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:

ANDREA JOHANSSON  
Name of Contact Person

MORADA WAY ARTS AND CULTURAL DISTRICT, INC.  
Firm/Company

151 MORADA WAY  
Address

ISLAMORADA, FL 33036  
City/State and Zip Code

INFO@MORADAWAY.ORG  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

ANDREA JOHANSSON at (305) 522-4419  
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

**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: MORADA WAY ARTS AND CULTURAL DISTRICT, INC

2. The principal office address: 151 MORADA WAY  
ISLAMORADA FL 33036

3. The mailing address (if different): \_\_\_\_\_

4. Date of incorporation/qualification: 2/15/2011 Document number: N11000001503

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)

ANDERS URBOM (RESIGNED)  
151 MORADA WAY  
ISLAMORADA, FL 33036

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

ANDREA JOHANSSON  
151 MORADA WAY  
P.O. Box NOT acceptable  
ISLAMORADA, FL 33036

FILED  
TALLAHASSEE  
DIVISION OF CORPORATIONS  
JUL 27 AM 11:50

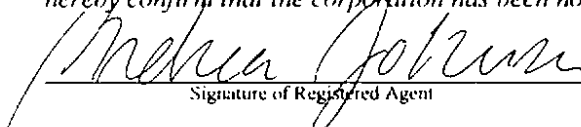
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

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

CRAIG MCILROY - CHAIRMAN  
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

7/23/18  
Date

If signing on behalf of an entity:

ANDREA JOHANSSON  
Typed or Printed Name

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