

N11 000005836

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2/6/17

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Tampa Study Group Inc
Name of Corporation

DOCUMENT NUMBER: N11000005836

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:

Yvonne Muhammad (VP)
Name of Contact Person

Tampa Study Group
Firm/Company

3204 Pinellas Place
Address

Tampa, Florida 33619
City/State and Zip Code

yy-mu40@yahoo.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Yvonne Muhammad at (813) 335-9971
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: Tampa Study Group Inc.
2. The principal office address: 13510 Copperhead Drive
Riverview, Florida 33569
3. The mailing address (if different): 3204 Pinellas Place
Tampa, Florida 33610
4. Date of incorporation/qualification: June 16, 2011 Document number: N11000005836
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)

Resigned

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

Chad Freaney
2408 E. Emma Street
P.O. Box NOT acceptable
Tampa, FL 33610

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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.

Muhammad
Signature of an officer or director

Yvonne Muhammad (VP)
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.

Chad Freaney
Signature of Registered Agent

03/30/2016
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
CORP045 (03/13)