

N120000000741

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

(Document Number)

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change

02/11/13--01037--013 \*\*35.00

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2013 FEB 11 PM 2:42  
TALLAHASSEE, FLORIDA  
SECRETARY OF STATE

RR  
2/13/13

**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: Tarpon Springs Art Association, Inc.
2. The principal office address: 39650 US HWY 19 N #1413  
TARPON SPRINGS FL 34689
3. The mailing address (if different): \_\_\_\_\_
4. Date of incorporation/qualification: 1/20/12 Document number: N12000000741
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)

RISLEY, HEATHER

2906 OAK CIRCLE

TARPON SPRINGS FL 34689 US

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

NRAI Services, Inc.


515 East Park Avenue,

P.O. Box NOT acceptable

Tallahassee, Florida 32301

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

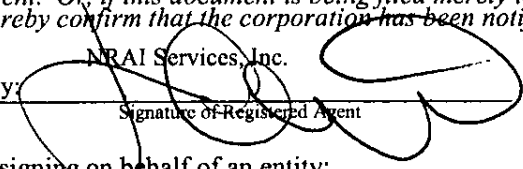
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

  
Signature of an officer or director

Ryan Black- President

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.*

By:   
Signature of Registered Agent

2/1/13  
Date

If signing on behalf of an entity:

Josh Cutone- Assistant Secretary

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

CR2E045 (03/12)