## N130000041

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A RAMSEY

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

SUBJECT: Florida Community Financial Services Association, Inc.

Name of Corporation

DOCUMENT NUMBER: N13000000661

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:

Warren Husband

Name of Contact Person

Metz, Husband & Daughton, P.A.

Firm/Company

P.O. Box 10909

Address

Tallahassee, FL 32302-2909

City/State and Zip Code

whh@metzlaw.com

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

For further information concerning this matter, please call:

Warren Husband

....850

205-9000

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

•	•	organized under the laws of the State of Florida  organized under the laws of the State of Florida
		registered agent, or both, in the State of Florida.
1. The name of	the corporation: Florida Comn	nunity Financial Services Association, Inc.
2. The principal	office address: 119 S. Monro	e St., Ste 200, Tallahassee, FL 32301-1591
3. The mailing a	ddress (if different): P.O. Box	10909, Tallahassee, FL 32302-2909
4. Date of incor	poration/qualification: 01/22/20	Document number: N1300000661
	I street address of the current registement of State: (If resigned, enter i	tered agent and registered office on file with the resigned)
	Warren Husband	
	215 S. Monroe St., Ste 5	505
	Tallahassee, FL 32301-	1804
6. The name and (if changed):	l street address of the new register	ed agent (if changed) and /or registered office
	Warren Husband	ASSEE OF
	119 S. Monroe St., Ste 2	200 lox NOT acceptable
	Tallahassee, FL 32301-	
The street address changed will	ess of its registered office and the be identical.	street address of the business office of its registered agent,
Such change wa authorized by the	as authorized by resolution duly a ne board, or the corporation has be	dopted by its board of directors or by an officer so een notified in writing of the change.
- Janus Signatu	and of the of director	Warren Husband, Asst. Treasurer Printed or typed name and title
I further agrée performance of	to comply with the provisions of a my duties, and I am familiar with	ent and agree to act in this capacity. Il statutes relative to the proper and complete and accept the obligation of my position as registered to reflect a change in the registered office address, I ified in writing of this change.
Al.	no shard	08/07/2015
Sig	nature of Registered Agent	Date
If signing on be	chalf of an entity:	
т	yped or Printed Name	
-	* •	

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