113000004483

(Re	questor's Name)	
(Ad	dress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP		MAIL
(Bu	isiness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
	Office Use On	lv



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JAN 3 - 2018 I ALBRITTON

COVER LETTER

TO: Amendment Section **Division of Corporations**

USSC Scholarship Fund, Inc. Name of Corporation SUBJECT:

N13000004483 DOCUMENT NUMBER:

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:

	Name of Contact Person
USSC Scr	nolarship Fund, Inc.
	Firm/Company
111 Ponce	de Leon Avenue
	Address
Clewiston,	FL 33440
	City/State and Zip Code
mwade@u	ssugar.com

For further information concerning this matter, please call:

Malcolm S. Wade, Jr.

Name of Contact Person

863 902-2461 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

CR2E045 (03/12)

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

1. The name of th	
2. The principal of	office address: 111 Ponce de Leon Avenue
	Clewiston, FL 33440
3. The mailing ac	ddress (if different): Same
4. Date of incorp	oration/qualification: 5/13/2013 Document number: N13000004483
	street address of the current registered agent and registered office on file with the tment of State: (If resigned, enter resigned)
	Edward Almeida- Registered Agent
	111 Ponce de Leon Avenue
	Clewiston, FL 33440
6. The name and (if changed):	street address of the new registered agent (if changed) and /or registered office
	Luke Kurtz- Registered Agent
	Luke Kurtz- Registered Agent 111 Ponce de Leon Avenue
	P.O. Box NOT acceptable
	Clewiston, FL 33440

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.

Malcolm S. Wade, Jr., Secretary signature of an officer or director 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

Date

If signing on behalf of an entity

Typed or Printed Name

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