N14745

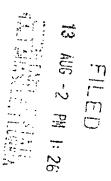
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COVER LETTER

TO: A:	mendment Section Division of Corporations	
	Nassau Humane Society, Inc.	
SUBJECT	T:Name of Corp	poration
	N14745	
DOCUM	ENT NUMBER:	
The enclo	osed Statement of Change of Registered Office/A	Agent and fee are submitted for filing.
Please reti	turn all correspondence concerning this matter to	the following:
	Joshua K. Martin	
	Name of Conta	ct Person
	Davis, Martin & Bernard, P.A.	
	Firm/Com	pany
	960185 Gateway Boulevard, Suit	te 104
	Addres	s
	Amelia Island, Florida 32034	
	City/State and	Zip Code
	jmartin@davisandmartin.com	
	E-mail address: (to be used for futu	re annual report notification)
For furthe	er information concerning this matter, please cal	l:
Joshua	K. Martin	904 261-2848
	Name of Contact Person	at () Area Code & Daytime Telephone Number
Enclosed	is a \$35.00 check made payable to the Departme	ent 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

TO:

BOTH FOR CORPORATIONS

	Nassau Humane Society, Inc.	
1. The name of	t the corporation:	loooh Florido 22024
2. The principa	671 Airport Road, Fernandina B	each, Florida 32034
	P.O. Box 16090, Fernandin	a Beach, Florida 32035
3. The mailing	address (if different):	
4. Date of inco	orporation/qualification: 05/06/1986 Docum	ent number:
	nd street address of the current registered agent and registerent of State: (If resigned, enter resigned)	stered office on file with the
	Wesley R. Poole	The state of the s
	303 Centre Street, Suite 200, Allan Building	NE
	Fernandina Beach, Florida 32034	# G
6. The name ar (if changed)	nd street address of the new registered agent (if changed	12 4 N
		12 4 N
		12 4 N
	Registered Agent: Joshua K. Martin	12 4 N
(if changed)	Registered Agent: Joshua K. Martin 960185 Gateway Boulevard, Suite 104 P.O. Box NOT acceptable) and /or registered office
(if changed) The street addras changed wi	Registered Agent: Joshua K. Martin 960185 Gateway Boulevard, Suite 104 P.O. Box NOT acceptable Amelia Island, Florida 32034	and /or registered office (1)
(if changed): The street addias changed will Such change wanthorized by	Registered Agent: Joshua K. Martin 960185 Gateway Boulevard, Suite 104 P.O. Box NOT acceptable Amelia Island, Florida 32034 Press of its registered office and the street address of the II be identical. Was authorized by resolution duly adopted by its board the board, or the corporation has been notified in writing	and /or registered office so and /or registered office so and of directors or by an officer so and of the change.
(if changed): The street addition as changed will be changed will be compared by the compared	Registered Agent: Joshua K. Martin 960185 Gateway Boulevard, Suite 104 P.O. Box NOT acceptable Amelia Island, Florida 32034 Press of its registered office and the street address of the II be identical. Was authorized by resolution duly adopted by its board the board, or the corporation has been notified in writing	and /or registered office business office of its registered agent of directors or by an officer so ng of the change. andrean, President Printed or typed name and title t in this capacity. o the proper and complete is at ion of my position as registered
The street add as changed will such change wanthorized by authorized by a line of the property	Registered Agent: Joshua K. Martin 960185 Gateway Boulevard, Suite 104 P.O. Box NOT acceptable Amelia Island, Florida 32034 Tress of its registered office and the street address of the II be identical. Was authorized by resolution duly adopted by its board the board, or the corporation has been notified in writing the provision of all statutes relative to fine duties, and I am familiar with and accept the obligation.	and /or registered office business office of its registered agent of directors or by an officer so ng of the change. andrean, President Printed or typed name and title t in this capacity. o the proper and complete is at ion of my position as registered

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