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COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: Florida Association for Constitutional Officers

Name of Corporation

DOCUMENT NUMBER: N16000011866

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:

Gigi Rollini, Esq.

Name of Contact Person

Stearns Weaver Miller

Firm/Company

106 E. College Ave., Ste. 700

Address

Tallahassee, FL 32301

City/State and Zip Code

grollini@stearnsweaver.com

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

For further information concerning this matter, please call:

Gigi Rollini, Esq.

,850

329-4877

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

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

statement of cha	provisions of sections 607.0502, 617.05 inge is submitted for a corporation orga r to change its registered office or regis	mized under the laws of the	State of Florida	
1. The name of t	he corporation: Florida Association	on for Constitutional	Officers, Inc.	
2. The principal	office address: 106 East College	Avenue, Suite 700,	Tallahassee, FL 32301	
3. The mailing a	ddress (if different): Same as abor	ve		
4. Date of incorp	poration/qualification: 12/13/16	Document number:	N16000011866	
	I street address of the current registered tment of State: (If resigned, enter resign	_	on file with the	
	ROLLINI, GIGI		5 _	
	2618 CENTENNIAL PLACE			
	TALLAHASSEE, FL 32308			
6. The name and (if changed):	street address of the new registered agent (if changed) and /or registered office		stered office	
	Change in Registered Office	e only:	ZM T	
106 East. College Avenue, Suite 700				
	Tallahassee, FL 32301	от ассерване		
The street addre	ess of its registered office and the stree be identical.	t address of the business of	fice of its registered agent.	
Such change wa	is authorized by resolution duly adopte the board, or the corporation has been no	d by its board of directors of	or by an officer so	
Jerry L. Demings, President Spenature of an officer or director Spenature of an officer or director Printed or typed name and title				
I hereby accept I further agree i performance of agent. Or, if the	the appointment as registered agent as comply with the provisions of all stamy duties, and I am familiar with and is document is being filed merely to rejutate the corporation has been notified	tutes relative to the proper accept the obligation of my Tect a change in the registe	and complete position as registered	
191	Dell.	June 14, 2018		
U^{-1}	half of an autitus	Date		
Gigi Rollini,	half of an entity:			
	ped or Printed Name			

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