N17000005440

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COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: CATELLYST FOUNDATION INC.
DOCUMENT NUMBER: N 1706000 5440
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:
TODD HUBER Name of Contact Person CATIFLLYST FOUNDATION, INC Firm/Company 525 8 TH AVE N Address ST. PETENSBURG, FL 33761 City/State and Zip Code TODD. HUBER D CATTELLYST, ORG- E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
TODD HUBER at (941) 930-0948 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
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

CR2E045 (04/E3)

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 F40010A in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: CATEUYST FOUNDATION, INC.
2. The principal office address: 525 8TH AVE NORTH, ST PETERSBURG FL
33701
3. The mailing address (if different): 58 ME
4. Date of incorporation/qualification: <u>MAY 19,2017</u> Document number: <u>N17000005440</u>
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)
UNITED STATES CORPORATION AGENTS, INC5575 S. SEMORAN BLVO
SUITE 36
ORLANDO, FL 32822
6. The name and street address of the new registered agent (if changed) and /or registered office of the first changed): Topo Huben
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525 8TH AVE NOLTH P.O. BOX NOT acceptable ST PERSBURG, FZ 33701
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 CHAIZMAN 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 * * *

Make Checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 CR2E045 (04/13)