## NI7 00000 9887

(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					





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06/25/20--81014--913 \*\*35.00

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## **COVER LETTER**

TO:	Amendment Section Division of Corporations			
	Division of Corporations			
SUBJ. Name	ECT: FLORIDA COLLEGE ENGLISH ASSOC	CIATION INC.		
	·			
DOCU	JMENT NUMBER: N17000009887	<del>-</del> -		
The er	iclosed Statement of Change of Registered O	ffice/Agent and f	ee are submitted for filing	•
Please	return all correspondence concerning this m	atter to the follow	ing:	
	,		Ü	
Christo	opher Nank			
Name	of Contact Person			
FLOR	IDA COLLEGE ENGLISH ASSOCIATION INC	· ·		
Firm/C	Company			
505 W	124th Ave			
Addre	ss			
Tampa	a, FL 33612			
City/S	tate and Zip Code			
	cnank@hotmail.com			
E-mai	I address: (to be used for future annual re	port notification	<u> </u>	
For fu	rther information concerning this matter, plea	ase call:		
Christo	opher Nank	at ( 352	350 -0258	
	Name of Contact Person	Area C	ode & Daytime Telephon	e Number
Enclos	sed is a \$35.00 check made payable to the De	partment of State		

Mailing Address: Amendment Section

Division of Corporations P.O. Box 6327

Tallahassee, FL 32314

## **Strect Address:**

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

CR2E045 (04/13)

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

statement of cha	provisions of sections 607.0502, 617.0 inge is submitted for a corporation org ir to change its registered office or reg	ganized under the laws of the St	tate of FLORIDA	
	the corporation: FLORIDA COLLEGE	J	_	
2. The principal	office address: 505 W 124th Ave	4.		
Tampa, FL 3361			·	
3. The mailing a	address (if different): 505 W 124th Ave	., Tampa, FL 33612		
	poration/qualification: 10/02/2017		17000009887	
	d street address of the current registere rtment of State: (If resigned, enter resigned,		i file with the	
	A1A REGISTERED AGENT INC.			
	505 W 124th Ave		<b>⊱</b> >	
	Tampa, FL 33612		2020 JUN	
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):				
	Christopher Nank		AM CO	
	505 W 124th Ave		8: 3 <b>9</b>	
	P.O.	Box NOT acceptable		
	Tampa, FL 33612			
The street address changed will	ess of its registered office and the stre be identical.	eet address of the business offi	ce of its registered agent.	
Such change was authorized by the	as anthorized by resolution duly ador he hoard, or the corporation has been	oted by its board of directors of motified in writing of the char	r by an officer so age.	
	The White	Christopher Nank	D	
	re of an officer or director	Printed or typed na		
I further agrée of my duties, ar document is bei	the appointment as registered agent to comply with the provisions of all s ad I am familiar with and accept the ding filed merely to reflect a change in s been notified in writing of this chan	tatutes relative to the proper a obligation of mv position as re the registered office address,	ind complete performance	
	material Albertanted Agent	June 22, 2020		
_	chalf of an entity:			
Christopher Nan	k			
	yped or Printed Name			

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

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

CR2E045 (04/13)

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