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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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T. LEBLANC

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: STORM SEARCH AND RESCUE
Name of Corporation

DOCUMENT NUMBER: NEW

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:

Robert J. Loree
Name of Contact Person

STORM SEARCH AND RESCUE NON PROFIT CO
Firm/Company

14260 Newberry Rd. #359
Address

NEWBERRY, FLA 32669
City/State and Zip Code

STORM TEAM STAFF@GMAIL.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Robert Loree at 910, 768-8566
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

**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 FLORIDA in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: STORM SEARCH AND RESCUE Non Prof
2. The principal office address: 14260 Newberry Rd. #359
Newberry, FLA 32669
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 7-10-18 Document number: NEW
5. 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)

Wendell Wright
1946 S.W. 226th ST
FLUSHING, FLA 48433

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Wendell Wright
1946 S.W. 226th ST
Newberry, FLA 32669

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TALLAHASSEE, FLORIDA

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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]
Signature of an officer or director

Robert J. Loke III
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] for Wendell Wright
Signature of Registered Agent

7-26-18
Date

If signing on behalf of an entity:

Robert J. Loke III
Typed or Printed Name

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