N21145

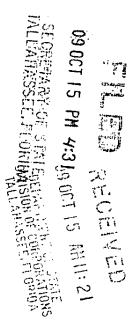
(1	Requestor's Name)				
(Address)				
(Address)				
(1	City/State/Zip/Phone #)				
PICK-UP	☐ WAIT	MAIL			
(Business Entity Name)					
`	•				
(Document Number)					
Certified Copies	Certificates of	Status			
Special Instructions to Filing Officer:					

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R-A. Charge C.COULLIETTE OCT 16 2009

EXAMINER



1203 Governors Square Blvd. Tallahassee, FL 32301-2960

850 222 1092 tel 850 222 7615 fax www.ctlegal solutions.com

October 15, 2009

Department of State, Florida Clifton Building 2611 Executive Center Circle Tallahassee FL 32301

Re:

Order #: 7676723 SO

Customer Reference 1:

COA

Customer Reference 2: None Given

Dear Department of State, Florida:

Please obtain the following:

Dunnellon Lodge No. 2308, Loyal Order of Moose, Inc. (FL) Change of Agent Florida

Enclosed please find a check for the requisite fees. Please return document(s) to the attention of the undersigned.

If for any reason the enclosed cannot be processed upon receipt, please contact the undersigned immediately at (850) 222-1092. Thank you very much for your help.

Sincerely,

Freddy Morales Corporate Operations Mgr. freddy.morales@wolterskluwer.com

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

statement of cha	nge is submitted for a corp	poration organiz	607.1508, or 617.1508, Florida Stoped under the laws of the State of Flowed agent, or both, in the State of Flowed	orida
1. The name of t	he corporation: Dunnellon	Lodge No. 2308,	Loyal Order Of Moose, Inc.	<u></u>
2. The principal				
-	ddress (if different): 886 DUNNELLON FL 344			
4. Date of incorp	oration/qualification:	06/15/87	Document number:	N21145
5. The name and		ent registered age	ent and registered office on file with	the
	CORPORATION SERVICE	CE COMPANY		
	1201 HAYS STREET TALLAHASSEE FL 32301			
6. The name and (if changed):	Street address of the new C T Corporation System c/o C T Corporation System Plantation, Florida 33324			O9 OCT 15 PH 4: 31 EGRETARY OF STATE LUADE SEELEN OR OF
The street addre		and the street a	ddress of the business office of its	registered agent,
			by its board of directors or by an of fied in writing of the change. Kimberly Breunling, Vice P	officer so
I hereby accept I further agree t of my duties, an document is bei	the appointment as regis the appointment as regis o comply with the provisi d I am familiar with and ng filed merely to reflect been notified in writing	ions of all statut accept the oblig a change in the	Printed or typed name and title agree to act in this capacity. tes relative to the proper and comp ation of my position as registered registered office address, I hereby	
By: 10/15/09		10/15/09		
Sign Rebecca Bar	nature of Registered Agent th Assistant Secreta: half of an entity:	ry	Date	
Ту	ped 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 (8/05)