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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 : (307)200-2803

Fax Number : (813)436-5206

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:	

REGISTERED AGENT CHANGE GAIGE ROBBINS'S GOOD CITIZENSHIP SCHOLARSHIP, INC.

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

statement of cha	nge is submitted for a corporation	617,0502, 607,1508, or 617,1508, Florida Statutes on organized under the laws of the State of <u>FU</u> or registered agent, or both, in the State of Florida.	
	•	S'S GOOD CITIZENSHIP SCHOLARSHIP, INC.	
3. The mailing a			
4. Date of incorp	ooration/qualification: 01/11/2024	Document number: N24000000336	
	I street address of the current regi tment of State: (If resigned, enter	istered agent and registered office on file with the resigned)	
	LEGALING CORPORATE SERVI	CES INC.	
	476 RIVERSIDE AVE		
	JACKSONVILLE, FL 32202		
6. The name and (if changed):	I street address of the new registe	ered agent (if changed) and /or registered office	2024 FEB 16
	Northwest Registered Agent LLC		- EB .
	7901 4th St N STE 300	> 	,
St. Petersburg FL 33702			
	St. Petersburg FL 33702		ं इ. इ. इ.
The street addre	ess of its registered office and the identical.	e street address of the business office of its regist	tered agent.
Such change wa authorized by th	ns authorized by resolution duly ne board, or the corporation has	adopted by its board of directors or by an officer been notified in writing of the change.	· so
Asignatur	tian i Grahara	William Graham, President	
I hereby accept I further agree t of my duties, an document is bei corporation has	the appointment as registered a to comply with the provisions of d I am famihar with and accept ng filed merely to reflect a chan s been notified in writing of this	igent and agree to act in this capacity. Call statutes relative to the proper and complete j the obligation of my position as registered agent age in the registered office address. I hereby conf change.	performance t. Or, if this irm that the
7-N-		02/16/2024	
Sig	nature of Registered Agent	Date	
If signing on be	half of an entity:		
Taylor Newman			
7.	and as Drintad Shana	_	

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