N93000003021

(Red	questor's Name)	
(Add	dress)	
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(City	y/State/Zip/Phone #)
PICK-UP	WAIT	MAIL
(Bu:	siness Entity Name	
(Do	cument Number)	
Certified Copies	_ Certificates o	f Status
	511 Officer	
Special Instructions to	Filing Officer:	
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Office Use Only



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10/15/09--01006--014 **35.00



OCT 15 2009

EXAMINER



1203 Governors Square Blvd. Tallahassee, Ft 32301-2960

850 222 1092 tel 850 222 7615 fax www.ctlegalsolutions.com

October 15, 2009

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

Re:

Order #: 7676785 SO

Customer Reference 1: COA

Customer Reference 2: None Given

Dear Department of State, Florida:

Please obtain the following:

MacClenny Lodge No. 2412, 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,

Connie R Bryan Senior Fulfillment Specialist Connie.Bryan@wolterskluwer.com

COVER LETTER

Amendment Section Division of Corporations

TO:

SUBJECT:	Macclenny Lodge No. 2412, Loyal C	
	Name of Corpo	pration
DOCUMENT NUI	MBER:N93000	003021
The enclosed Staten	nent of Change of Registered Office/A	gent and fee are submitted for filing.
Please return all cor	respondence concerning this matter to	the following:
-	Name of Contac	t Person
•	Firm/Comp	any
	Address	
	City/State and 2	ip Code
••••	E-mail address: (to be used for future	e annual report notification)
For further information	tion concerning this matter, please call:	
Nam	ne of Contact Person	t () Area Code & Daytime Telephone Number
		· · · ·
Enclosed is a \$35.00	0 check made payable to the Departmen	nt of State.
	Mailing Address: Amendment Section	Street Address: Amendment Section
	Division of Corporations	Division of Corporations
	P.O. Box 6327	Clifton Building
	Tallahassee, FL 32314	2661 Executive Center Circle

Tallahassee, FL 32301

CR2E045 (8/05)

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

statement of cha	nge is submitted for a corp	ooration organize	607.1508, or 617.1508, Flori ed under the laws of the State ed agent, or both, in the State	of Florida	ì	_	
1. The name of t	he corporation: Macclenny	Lodge No. 2412,	Loyal Order Of Moose, Inc.				
2. The principal				- · · · · · · · · · · · · · · · · · · ·			
_	ddress (if different): 1482 MACCLENNY FL 32						
4. Date of incorp	ooration/qualification:	06/29/93	Document number:	N930	0000302	<u> </u>	
	tment of State: (If resigned	d, enter resigned)	ent and registered office on file				
	CORPORATION SERVICE	CE COMPANY					
	1201 HAYS STREET TAI	LLAHASSEE FL	32301				
6. The name and (if changed):	street address of the new	registered agent	(if changed) and /or registered	 I office	SECRETA NULLATIVE	99 OCT	,
, ,	C T Corporation System					(Z)	91. 2/2 2/2 2/2 2/2
	c/o C T Corporation System					PH 12:	
	Plantation, Florida 33324	P.O. Box NOT a	ecceptable			သ > >	
			ddress of the business office			gent,	
authorized by the	is authorized by resolution he board, or the corporation	n duly adopted ton has been noting	by its board of directors or by fied in writing of the change.	y an offic	er so		
	/2/		Kimberly Breunling,	Vice Presid	dent		
_	re of an officer or director		Printed or typed name a			_	
I further agree i of my duties, an document is bei	the appointment as regis to 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	agree to act in this capacity. es relative to the proper and ation of my position as regis registered office address, I h	complete tered age ereby cor	e perform int. Or, i infirm tha	ance f.this t the	
By: Left Corporation System 10/15/09		,					
Rebecca Bar	nature of Registered Agent th Assistant Secreta: half of an entity:	ry	Date			_	
T;	yped or Printed Name	············					

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (8/05)

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