

N950000005985

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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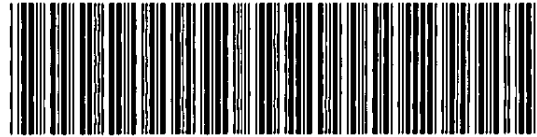
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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17 APR 27 PM 3:29
SECRETARY OF CORPORATION
DIVISION OF CORPORATIONS

2017 APR 27 AM 11:05
TALLAHASSEE, FLORIDA

APR 28 2017
C McNAIR

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

17 APR 27 PM 3:29
SECRETARY OF CORPORATIONS
STATE OF FLORIDA

ACCOUNT NO. : I20000000195

REFERENCE : 617145 4384197

AUTHORIZATION :

COST LIMIT : \$35.00

[Handwritten Signature]

ORDER DATE : April 27, 2017

ORDER TIME : 10:06 AM

ORDER NO. : 617145-005

CUSTOMER NO: 4384197

CHANGE OF AGENT

NAME: FIFTY OVER FIFTY, INC.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

____ CERTIFIED COPY
XX PLAIN STAMPED COPY

CONTACT PERSON: Melissa Zender -- EXT#

EXAMINER: _____

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

1. The name of the corporation: Fifty Over Fifty, Inc.
2. The principal office address: 714 Calatrava Ave. Coral Gables, FL 33143
3. The mailing address (if different): _____
4. Date of incorporation/qualification: FL Document number: N95000005985
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)

CF REGISTERED AGENT, INC.

100 S. Ashley Drive Suite 400 Tampa, FL 33602

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

Corporation Service Company

1201 Hays Street

P.O. Box NOT acceptable

Tallahassee

FL 32301

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 this change.

Maureen Gragg
Signature of an officer or director

Maureen Gragg
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.

Corporation Service Company

By

Harry B. Davis
Signature of Registered Agent

4/27/17
Date

If signing on behalf of an entity:

Harry B. Davis

Asst. Vice President

Typed 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

CR2P045 (03/12)

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SECRETARY OF STATE
DIVISION OF CORPORATIONS