

N96000003200

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

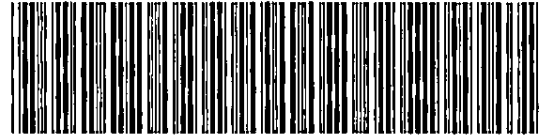
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FL

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Pasco-Hernando Workforce Board, Inc., dba CareerSource Pasco Hernando
Name of Corporation

DOCUMENT NUMBER: N96000003200

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:

Heather Harter

Name of Contact Person

CareerSource Pasco Hernando

Firm/Company

P.O. Box 6589

Address

Spring Hill, FL 34611

City/State and Zip Code

hharter@careersourcepascohernando.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Heather Harter

Name of Contact Person

at (352) 848-5109

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: Pasco-Hernando Workforce Board, Inc.
2. The principal office address: 16336 Cortez Blvd., Brooksville, FL 34601
3. The mailing address (if different): P.O. Box 6589, Spring Hill, FL 34611
4. Date of incorporation/qualification: 1996 Document number: N96000003200
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)

Jerome A. Salatino
7361 Forest Oaks Blvd., Spring Hill, FL 34606

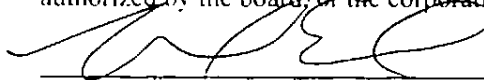
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Jerome A. Salatino
16336 Cortez Blvd., Brooksville, FL 34601
P.O. Box NOT acceptable

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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.

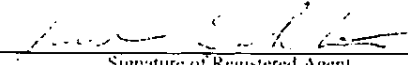


Signature of an officer or director

Mark Earl Board member

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 of Registered Agent

November 8, 2018

Date

If signing on behalf of an entity:

Typed or Printed Name

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