

N98000002598

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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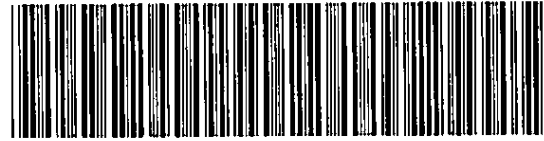
(Business Entity Name)

(Document Number)

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## COVER LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: Royal Palm Academy  
Name of Corporation

DOCUMENT NUMBER: N98 00000 2598

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:

Dennis Frodsham, Business Manager/CFO  
Name of Contact Person

Royal Palm Academy  
Firm/Company

16100 Livingston Rd.  
Address

Naples, FL 34110  
City/State and Zip Code

d.frodsham@royalpalmacademy.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Scott Baier at (239) 594-9888  
Name of Contact Person 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  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

**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: Royal Palm Academy, Inc.  
2. The principal office address: 16100 Livingston Rd  
Naples, FL 34110  
3. The mailing address (if different): \_\_\_\_\_

4. Date of incorporation/qualification: May 6, 1998 Document number: N 98000102978

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)

Jeff Novatt, ESQ (Resigned)  
821 Fifth Avenue South  
Naples, FL 34102

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

Suzanne Bogdan, ESQ, Fisher & Phillips LLP  
450 E. Las Olas Blvd., Suite 800  
P.O. Box NOT acceptable  
Ft. Lauderdale, FL 33301

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] Charles R Ciuni, Treasurer  
Signature of an officer or director 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.

Suzanne Bogdan  
Signature of Registered Agent

12-10-20  
Date

If signing on behalf of an entity:

\_\_\_\_\_  
Typed or Printed Name

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE