N98000002824

-	(Requestor's Name)	
	(Address)	
	(\text{Vagiess})	
	(Address)	
	(City/State/Zip/Phone #)	
PICK-UP	WAIT	MAIL
	_	_
	(Business Entity Name)	
	70	
	(Document Number)	
Certified Copies	Certificates of	Status
	_	
Special Instructions to	Filing Officer	

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SECRETARY OF STATE OF

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2029 SEP 19 AM 9: 34



CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE : 977187 8424787

AUTHORIZATION : //

COST LIMIT : 75 35 00 ha

ORDER DATE: September 8, 2023

ORDER TIME : 12:04 PM

ORDER NO. : 977187-008

CUSTOMER NO: 8424787

CHANGE OF AGENT

NAME: MORSELIFE HOUSING CORPORATION,

INC.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
XX PLAIN STAMPED COPY

CONTACT PERSON: Alexxis Weiland-sorenson -- EXT#

EXAMINER: _

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

statement of cha	nge is submitted for a corpora	2, 617.0502, 607.1508, or 617.1508, ation organized under the laws of the eor registered agent, or both, in the	State of FL	
1. The name of t	he corporation: MORSELIFE I	HOUSING CORPORATION, INC.		
		. MACK DRIVE WEST PALM BEAC	DH, FL 33417	
3. The mailing a	ddress (if different);			
4. Date of incorp	of incorporation/qualification: 05/05/1998 Document number: N98000002824			
	street address of the current r tment of State: (If resigned, er	egistered agent and registered office (nter resigned)	on file with the	
	MYERS, KEITH A		282 TA	
	4847 DAVID S. MACK DRIV	/E	2829 SEP 19 SLUKCIAS	
	WEST PALM BEACH, FL 3		19 19 ASS	
6. The name and (if changed):	street address of the new regi	stered agent (if changed) and /or regi	EE. FLORID	
	Corporation Service Compa	ny	Det F	
	1201 Hays Street			
	P.O Box NOT acceptable			
	Tallahassee	FL 32301		
The street addre as changed will	ss of its registered office and be identical.	the street address of the business of	ffice of its registered agent.	
Such change wa authorized by th	is authorized by resolution du e board, or the corporation ha	lly adopted by its board of directors as been notified in writing of the cha	or by an officer so ange.	
)	Mary C. ACOMON	JILL CILMI, VICE PRES	SIDENT	
٠ (e of an officer or director	Printed or typed		
i juriner agree i of my duties, an document is beil corporation has	the appointment as registered of comply with the provisions of lam familiar with and access filed merely to reflect a charten notified in writing of the Service Company	d agent and agree to act in this cape of all statutes relative to the proper on the obligation of my position as i ange in the registered office address is change.	icity. and complete performance registered agent. Or, if this s. I hereby confirm that the	
By: Llia	ea Cokuble	09/19/2023	<u> </u>	
Sign	nature of Registered Agent	Date	:	
If signing on bel	nalf of an entity:			
GRACE E KIRB	Y, ASST. VICE PRESIDENT			
Ti	ned or Printed Name			

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