N9900006698

(Re	questor's Name)				
(Ad	dress)				
(Ad	dress)	·			
(Cit	y/State/Zip/Phone	#)			
PICK-UP	☐ WAIT	MAIL			
(Bu	siness Entity Nam	ne)			
(Document Number)					
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DEPARTMENT OF STATIONS

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TO ACKNOWLEDGE

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INTEGRETATE OF S

C.COULLIETTE

OCT 16 2009

EXAMINER



1203 Governors Square Blvd. Tallahassee, FL 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 #: 7677763 SO

Customer Reference 1: COA

Customer Reference 2: None Given

Dear Department of State, Florida:

Please obtain the following:

Ocala Forest Lodge No. 2535, 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

the my transport of the state of

COVER LETTER

SUBJECT:	Ocala Forest Lodge No. 2535, Log	val Order Of Moose, Inc.			
	Name of Co	orporation			
DOCUMENT NUMBER: N99000006698					
The enclosed Statemen	t of Change of Registered Office	/Agent and fee are submitted for fil	ling.		
Please return all corres	pondence concerning this matter	to the following:			
	Name of Cor	tact Person			
Firm/Company					
	Addr	ess			
	7100	033			
_	City/State an	d 7in Codo			
	City/State an	d Zip Code			
	nail address: (to be used for fi	iture annual report notification)			
For further information	concerning this matter, please c	all:			
Name	of Contact Person	_ at () Area Code & Daytime Telepi	hana Numba		
Name o	I Contact Person	Area Code & Daytime Telepi	none Number		
Enclosed is a \$35.00 cl	neck made payable to the Departi	ment of State.			
	Mailing Address: Amendment Section	Street Address:			
		Amendment Section Division of Corporation	ne		
	Division of Corporations P.O. Box 6327	Clifton Building	10		
	Tallahassee FI 32314	2661 Executive Center	Circle		

Tallahassee, FL 32301

CR2E045 (8/05)

TO:

Amendment Section Division of Corporations

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

statement of cha	provisions of sections 607.050 nge is submitted for a corpor r to change its registered offu	ation organized	d under the laws of the State	of Florida
1. The name of t	he corporation:	_odge No. 2535,	Loyal Order Of Moose, Inc.	
2. The principal				
3. The mailing a	ddress (if different):			
4. Date of incorporation/qualification: 11/10/1999 Document number:				N99000006698
	street address of the current tment of State: (If resigned, e		t and registered office on file	e with the
	CORPORATION SERVICE	COMPANY		
	1201 HAYS STREET TALLA	AHASSEE FL 3	2301	
				— IAS
				— E0
6. The name and (if changed):	street address of the new reg	gistered agent (i	f changed) and /or registered	1 office
	C T Corporation System			
	c/o C T Corporation System,	1200 South Pine	Island Road	
		P.O. Box NOT acc	ceptable	2: 46 2: 46
	Plantation, Florida 33324			
The street addre	ess of its registered office and be identical.	d the street add	dress of the business office	of its registered agent,
Such change we authorized by the	as authorized by resolution due board, or the corporation	luly adopted by has been notifi	y its board of directors or by ed in writing of the change	y an officer so
	In		Kimberly Breunling,	
0-	e of an officer of director		Printed or typed name	
I further agree i of my duties, an document is bei	the appointment as register to comply with the provision d I am familiar with and acc ng filed merely to reflect a c been notified in writing of t	s of all statute. cept the obliga change in the r	s relative to the proper and	complete performance
By: 12 (CT)	10/15/2009		9	
_	nature of Registered Agent th, Assistant Secretary	 -	Date	
	half of an entity:			
	and a Drived Name			
13	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 * * *