## P03000004863

(Re	questor's Name)		
(Ad	dress)	·· · · · · · · · · · · · · · · · · · ·	
(Ad	dress)		
(Cit	y/State/Zip/Phon	e #)	
PICK-UP	☐ WAIT	MAIL	
(Business Entity Name)			
(Document Number)			
Certified Copies	_ Certificate	s of Status	
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SECRETARY OF STAIL

## **COVER LETTER**

ŤO:	Amendment Sec Division of Corp			
CHR	TECT:	CoAdvantage Resources 28	3, Inc.	
SODO		Name of C	Corporation	
DOC	UMENT NUMBE	R: P0300004863		
The e	nclosed Statement	of Change of Registered Offic	ce/Agent and fee are submitted for t	filing.
Please	e return all corresp	ondence concerning this matte	or to the following:	
		Darlene Lemke		
		Name of Co	ntact Person	
		CoAdvantage Firm/Co	ompany	
		111 W Jefferson S		-
		Orlando, FL 3280		
	· · · · · ·		nd Zip Code	
	E-m	dlemke@coadvan ail address: (to be used for f	tage.com uture annual report notification)	
For fu	ırther information o	concerning this matter, please	call:	
	Darlene Lem		at ( 407 ) 447-1895 Area Code & Daytime Telep	
	Name of	Contact Person	Area Code & Daytime Telep	hone Number
Enclo	sed is a \$35.00 che	ck made payable to the Depar	tment of State.	TALLAHI
		Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Amendment Section Division of Corporatio Clifton Building 2661 Executive Center Tallahassee, FL 32301	Cirele, 24

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

statement of change is submitted for a	607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this corporation organized under the laws of the State of FLORIDA ed office or registered agent, or both, in the State of Florida.				
1. The name of the corporation:	CoAdvantage Resources 28, Inc.				
2. The principal office address:	3350 Buschwood Park Drive - Ste 200				
	Tampa, FL 32801				
3. The mailing address (if different):	111 W Jefferson St				
	Orlando, FL 32801				
4. Date of incorporation/qualification:	1/14/2003 Document number: P03000004863				
	urrent registered agent and registered office on file with the				
Mark Lowrey					
111 W Jefferso	on Street				
Orlando, FL 32					
6. The name and street address of the n (if changed):  Jeffrey J. Sjobe	ew registered agent (if changed) and /or registered office				
3350 Buschwo	3350 Buschwood Park Dr - Ste 200				
Tampa, FL 33	P.O. Box NOT acceptable				
The street address of its registered off as changed will be identical.	ice and the street address of the business office of its registered agent,				
Such change was authorized by resolu authorized by the board, or the corporation	tion duly adopted by its board of directors or by an officer so ation has been notified in writing of the change.				
Signature of an officer or director	Miguel A. Maseda, President/CEO Printed or typed name and title				
I further agree to comply with the pro- performance of my duties, and I am fa	gistered agent and agree to act in this capacity.  visions of all statutes relative to the proper and completed miliar with and accept the obligation of my position as registered led merely to reflect a change in the registered office address, as been notified in writing of this change.				
	9 30 13				
If signing on behalf of an entity:	Date LORIDA				
Jeffrey J. Sjobeck	•-				
Typed or Printed Name					

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