P03000089872

Florida Department of State
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Division of Corporations
Fax Number : (850)617-6380

From:
Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
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REGISTERED AGENT CHANGE
CRISAFI SERVICES, INC.

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	$35.00

RA/RO change

RE-SUBMIT
Please attach original filing
date of submission 3/14

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MAR 18 2014
T. CARTER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Crisafi Services, Inc.
Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Estate of Patsy J. Crisafi, Deceased
c/o Watson Mundorff Brooks & Sepic, LLP
Name of Person

Crisafi Services, Inc.
Firm/Company

720 Vanderbilt Road
Address

Connellsville, PA 15425-6218
City/State and Zip Code

lmudo@wmblaw.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Lisa at (724) 626-8882
Name of Person Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

☐ $25 Filing Fee ☐ $55 Filing Fee & Certified Copy

INHS18 (2/14)

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: Crisafi Services, Inc.
2. The principal office address: Watson Mundorff Brooks & Sepic, LLP, Attorneys for Estate of Patsy J. Crisafi, Deceased, 720 Vanderbilt Road, Connellsville, PA 15425
3. The mailing address (if different):
4. Date of incorporation/qualification: 08/15/2003 Document number: P03000089872
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)

   CRISAFI, DECEASED, ESTATE OF PATSY J
   6508 County Road 208
   ST. AUGUSTINE, FL 32092

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

   CT Corporation Systyem
   1200 South Pine Island Road
   P.O. Box NOT acceptable
   Plantation, Florida 33324

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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 — Printed or typed name and title: Lisa M Wunder P.S.

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 — Maria T. Chambers, Special Assistant Secretary — Date: 3/14/14

If signing on behalf of an entity:

CT Corporation System
Typed or Printed Name

* * * FILING FEE: $35.00 * * *

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

CR2E045 (03/12)