

PD600006 7355

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C. CARROTHERS

**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: Draven Corporation
2. The principal office address: 4201 Vineland Road, Suite I-12, Orlando, FL 32811

3. The mailing address (if different): 2952 Cedar Glenn Place, Oviedo FL 32765

4. Date of incorporation/qualification: 2006-01-17 Document number: P06000007355

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)

Jarrold Walters
2545 Clarinet Drive
Orlando, FL 32837

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

Jarrold Walters
4201 Vineland Road, Suite I-12
P.O. Box NOT acceptable
Orlando, FL 32811

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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.

Jarrold Walters
Signature of an officer or director

Jarrold T. Walters
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.

Jarrold Walters
Signature of Registered Agent

2016-08-19
Date

If signing on behalf of an entity:

Jarrold T. Walters
Typed or Printed Name

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

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Draven Corporation
Name of Corporation

DOCUMENT NUMBER: P06000007355

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:

Jarrold Walters

Name of Contact Person

Draven Corporation

Firm/Company

4201 Vineland Road, Suite I-12

Address

Orlando, FL 32811

City/State and Zip Code

accounting@dravenit.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jarrold Walters

Name of Contact Person

at (407) 392-1614

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
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301