P10000064467

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COVER LETTER

Division of	Corporations		
	CoAdvantage Resources 33, I	nc.	
SUBJECT:	Name of Cor	poration	
DOCUMENT NU	MBER: P10000064467		
The enclosed States	ment of Change of Registered Office/A	Agent and fee are submitted for filing.	
Please return all co	rrespondence concerning this matter to	o the following:	
	Darlene Lemke		
	Name of Conta	ct Person	
	CoAdvantage		
	Firm/Com	pany	
	111 W Jefferson St		
	Addres	is	
	Orlando, FL 32801		
	City/State and	Zip Code	
_	dlemke@coadvantag		
	E-mail address: (to be used for fut	are annual report notification)	
For further informa	tion concerning this matter, please cal	l:·	
Darlene	Lemke	at (407) 447-1895 Area Code & Daytime Telephone Number	
Nan	ne of Contact Person		•
Enclosed is a \$35.0	0 check made payable to the Departm	ent 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	- 1 T

TO:

Amendment Section

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

statement of change is submitted for a c	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 33, 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:	01/14/2003 Document number: P10000064467			
	irrent registered agent and registered office on file with the			
Mark Lowrey				
111 W Jefferson Street				
Orlando, FL 32801				
6. The name and street address of the ne (if changed):	ew registered agent (if changed) and /or registered office			
Jeffrey J. Sjobe	ck			
3350 Buschwood Park Dr - Ste 200				
	P.O. Box NOT acceptable			
Tampa, FL 336				
The street address of its registered offi as changed will be identical.	ce and the street address of the business office of its registered agent,			
Such change was authorized by resolut authorized by the board, or the corpora	tion duly adopted by its board of directors or by an officer so tion has been notified in writing of the change.			
Signature of an officer or director	Miguel A. Maseda, President/CEO			
I further agree to comply with the prove performance of my duites, and I am far agent. Or, if this document is being fil	ristered agent and agree to act in this capacity. Prisions of all statutes relative to the proper and complete in the proper and complete in the negation of my position as registered at merely to reflect a change in the registered office address, I is been notified in writing of this change.			
Signifur of My Registered Agent	9/30/13 PAR NO CO			
If signing on behalf of an entity:	Date 2			
Jeffrey J. Sjobeck Typed or Printed Name				

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