P10000064579

(Re	questor's Name)		
(Ad	ldress)		
(Address)			
(Cit	ty/State/Zip/Phone	e #)	
PICK-UP	☐ WAIT	MAIL	
	isiness Entity Nar		
(Du	isiness ⊏nuty ivar	ne)	
(Do	ocument Number)		
Certified Copies	_ Certificate:	s of Status	
Special Instructions to	Filing Officer		
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Office Use Only



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FILED 13 DCT -1 PM 12: 23 SECRETARY OF STATE SECRETARY OF STATE

COVER LETTER

	ent Section of Corporations					
SUBJECT:	CoAdva	antage Resources 3	88, Inc.			
Bobbiet.		Name of 0	Corporation	on	_	
DOCUMENT NU	JMBER:	P10000064579	····		_	
The enclosed State	ement of Chang	e of Registered Offi	ice/Agent	and fee are submitted for	filing.	
Please return all co	orrespondence o	concerning this matt	er to the f	following:		
		Darlene Lemke				
•		Name of Co	ontact Per	son	-	
		CoAdvantage				
			Company		-	
		111 W Jefferson			_ 	
		Ad	dress			
		Orlando, FL 328	01			
		City/State a	and Zip Co	ode		
-	E-mail addre	dlemke@coadvar ss: (to be used for		nual report notification	<u> </u>	
For further inform	ation concernin	g this matter, please	e call:			
	e Lemke		at (407 447-1895. rea Code & Daytime Tele		
Na	me of Contact I	erson	A	rea Code & Daytime Tele	phone Number	ľ
Enclosed is a \$35.	00 check made	payable to the Depa	artment of	State.	OCT - 1 CRETAR LAHASS	
	Division P.O. Box	nent Section of Corporations		Street Address: Amendment Section Division of Corporati Clifton Building 2661 Executive Center	ĒĒ.	っぱってい
		,		Tallahassee, FL 3230		

CR2E045 (03/12)

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
in order to change its register	red office or registered agent, or both, in the State of Florida.
1. The name of the corporation:	CoAdvantage Resources 38, 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:	08/05/2010 Document number: P10000064579
5. The name and street address of the c Florida Department of State: (If resi	current registered agent and registered office on file with the gned, enter resigned)
Mark Lowrey	
111 W Jefferso	on Street
Orlando, FL 3	2801
6. The name and street address of the re (if changed):	new registered agent (if changed) and /or registered office
Jeffrey J. Sjob	eck
3350 Buschwo	ood Park Dr - Ste 200
	P.O. Box NOT acceptable
Tampa, FL 33	618
The street address of its registered off as changed will be identical.	fice and the street address of the business office of its registered agent,
Such change was authorized by resolutionized by the board, or the corporation of the corp	ation duly adopted by its board of directors or by an officer so ration 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 hereby accept the appointment as re I further agree to comply with the pro performance of my duties, and I am fo agent. Or, if this document is being fi hereby confirm that the corporation h	rgistered agent and agree to act in this capacity. wisions of all statutes relative to the proper and complete miliar with and accept the obligation of my position as registered iled merely to reflect a change in the registered office address, I has been notified in writing of this change.
	9/30/3 = 50 12
Signate afferistered Agent If signing on behalf of an entity:	Date Service 23
Jeffrey J. Sjobeck	
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)