P1000064579

| (Requestor's Name) |
|---|
| (Address) |
| (Address) |
| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| (Business Entity Name) |
| (Document Number) |
| Certified Copies Certificates of Status |
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CORPORATION NAME (S) AND DOCUMENT NUMBER (S):

LISTING OF 39 CHANGE OF AGENT FORMS ATTACHED

| ALONG WITH A CHECK FOR | \$1,365.0 | 0 IN PAYMENT OF GROUP | | |
|--|-----------|-------------------------------------|--|--|
| Filing Evidence ☑ Plain/Confirmation | і Сору | <u>Type of Doc</u> □ Certificate of | | |
| □ Certified Copy | | □ Certificate of | Good Standing | |
| | | □ Articles Only | , | |
| Retrieval Reques | <u>t</u> | Articles & A □ Fictitious Na | Articles & Amendments □ Fictitious Name Certificate | |
| □ Certified Copy | | □ Other. | | |
| NEW FILINGS | | AMENDMENTS | | |
| Profit | | Amendment | | |
| Non Profit | | Resignation of RA Officer/Director | | |
| Limited Liability | X | Change of Registered Agent | 39 FILINGS | |
| Domestication | | Dissolution/Withdrawal | Sac List | |
| Other | | Merger | | |
| - | | | | |
| OTHER FILINGS | | REGISTRATION/QUALIFICATION | 1 | |
| Annual Reports | | Foreign | • | |
| Fictitious Name | | Limited Liability | | |
| Name Reservation | | Reinstatement | | |
| Reinstatement | | Trademark | | |
| 1 | <u> </u> | Other | | |

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

| statement of cha | ange is submitted for a corporation | 7.0502, 607.1508, or 617.1508, Florida Statutes organized under the laws of the State of FL | |
|--|--|--|--|
| | | registered agent, or both, in the State of Florida. RESOURCES 38, INC. | |
| 1. The name of | the corporation: COADVANTAGE F | NADY DD CTC 200 TANADA EL 22410 | |
| 2. The principal | office address: 3330 BUSCHWOOL | PARK DR STE 200, TAMPA FL 33618 | |
| 3. The mailing a | address (if different): 135 W CENTR | AL BLVD, ATTN: D LEMKE STE 600, | |
| 4. Date of incor | poration/qualification: 8/05/2010 | Document number: P10000064579 | |
| 5. The name and | | ered agent and registered office on file with the | |
| | SJOBECK, JEFFREY J | | |
| | 3350 BUSCHWOOD PARK DR ST | E 200 | |
| | TAMPA, FL 33618 | · | 震 子 |
| 6. The name and (if changed): | d street address of the new registered | d agent (if changed) and /or registered office | JIL-2 |
| | NRAI Services, Inc. | | 第二 宝 |
| | 1200 South Pine Island Road | | 2 2 2 2 2 2 2 3 3 4 3 4 3 4 3 4 3 4 3 4 |
| | Plantation, Florida 33324 | x NOT acceptable | |
| The street address changed will | ess of its registered office and the s be identical. | street address of the business office of its regist | ered agent, |
| | | opted by its board of directors or by an officer en notified in writing of the change. | |
| | | JEFFREY J SJOBECK, SECRETARY | |
| I hereby accept I further agree performance of agent. Or, if th hereby confirm | the appointment as registered age to comply with the provisions of all my duties, and I am familiar with is document is being filed merely to that the corporation has been noti | Printed or typed name and title int and agree to act in this capacity. It statutes relative to the proper and complete and accept the obligation of my position as reg o reflect a change in the registered office addre fied in writing of this change. | gistered ess, I |
| NRAI S By: | ervices, Inc. Ed Hand | 6/30/14 | |
| _ | half of an entity: | ψάιο | |
| ED HAND, ASS | - | | |
| T | yped 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)