

P11600024260

Florida Department of State
Division of Corporations
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To:

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

From:

Account Name : LOWNDES, BROSDICK, DOSTER, KANTOR & REED, P.A.
Account Number : 072720000036
Phone : (407) 843-4600
Fax Number : (407) 843-4444
Att: Tami Passley

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: _____

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SEP 07 2018

REGISTERED AGENT CHANGE FLORIDA POLICY SOLUTIONS, INC.

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$35.00

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September 4, 2018

FLORIDA DEPARTMENT OF STATE
Division of Corporations

FLORIDA POLICY SOLUTIONS, INC.
2295 S. HIAWASSEE ROAD
SUITE 203
ORLANDO, FL 32835

SUBJECT: FLORIDA POLICY SOLUTIONS, INC.
REF: P11000024260

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The document must be signed by the chairman, any vice chairman of the board of directors, its president, or another of its officers.

The name and title of the person signing the document must be noted beneath or opposite the signature.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Susan Tallent
Regulatory Specialist II

FAX Aud. #: H18000256171
Letter Number: 118A00018232

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: Florida Policy Solutions, Inc.
2. The principal office address: 1226 Mt. Vernon Street, Orlando, Florida 32803
3. The mailing address (if different): 1226 Mt. Vernon Street, Orlando, Florida 32803
4. Date of incorporation/qualification: 3/9/2011 Document number: P11000024260
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)

Lori Killinger

2600 Centennial Place Ste 100

Tallahassee, Florida 32308

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

Jacqueline Bozzuto

215 N. Eola Drive

P.O. Box NOT acceptable

Orlando, Florida 32801

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.

Jacqueline Bozzuto
Signature of an officer or director

Jacqueline Bozzuto, Authorized Representative

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.

Jacqueline Bozzuto
Signature of Registered Agent

8/31/18

Date

If signing on behalf of an entity:

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
CR23945 (03/12)

FILED
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TALLAHASSEE, FL