## P12,000099324

(Re	questor's Name)		
(Ad	dress)		
(Ad	dress)		
(Cit	y/State/Zip/Phone	e #)	
PICK-UP	☐ WAIT	MAIL	
(Bu	siness Entity Nan	ne)	
(Document Number)			
Certified Copies	_ Certificates	s of Status	
Special Instructions to Filing Officer:			
!		•	

Office Use Only



900252250479

10/01/13--01031--001 \*\*1330.0

13 OCT - 1 PM 12: 23
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

## COVER LETTER

то:	Amendment Section Division of Corporation	ons		
SUR	ЛЕСТ:	CIP PEO IV, Inc.		
БОВС	, DC 1.	Name of Co	orporation	•
DOC	UMENT NUMBER:	P12000099324		-
The c	nclosed Statement of Ch	ange of Registered Offic	e/Agent and fee are submitted for:	filing.
Please	e return all corresponden	ace concerning this matter	r to the following:	
		Darlene Lemke		
	<del></del>	Name of Cor	ntact Person	
		CoAdvantage		
	<u> </u>	Firm/Co	ompany	
	<del></del>	111 W Jefferson S		_
		Addı	ress	
		Orlando, FL 3280		
		City/State an	nd Zip Code	
		dlemke@coadvant	tage.com	
	E-mail ad	dress: (to be used for fi	uture annual report notification)	
For fi		rning this matter, please o		
	Darlene Lemke Name of Conta	act Person	at ( <u>407</u> ) <u>447-1895</u> Area Code & Daytime Tele	phone Number
Enclo		ade payable to the Depart	• •	13 OCT SECRET
	Amer Divis P.O.	ng Address: ndment Section sion of Corporations Box 6327 hassee, FL 32314	Street Address: Amendment Section Division of Corporation Clifton Building 2661 Executive Center Tallahassee, FL 32301	r Cirdle 23

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

statement of change is submitted for a	507.0502, 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:	CIP PEO IV, Inc.		
The maine of the corporation:  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:	12/04/2012 Document number: P12000099324		
	urrent registered agent and registered office on file with the		
Mark Lowrey			
111 W leffered	on Street		
111 W Jefferson Street Orlando, FL 32801			
Offarido, 1 L 32	2001		
6. The name and street address of the n (if changed):	ew registered agent (if changed) and /or registered office		
Jeffrey J. Sjobe	eck		
3350 Buschwo	od 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.	ice and the street address of the business office of its registered agent,		
Such change was authorized by resolu authorized by the board, or the corporation of the c	tion duly adopted by its board of directors or by an officer so ation 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 relatively accept the appointment as relatively with the properformance of my duties, and I am fargent. On if this document is being fi	gistered agent and agree to act in this capacity. visions of all statutes relative to the proper and completed with and accept the obligation of my position as Tegistered led merely to reflect a change in the registered office and session as been notified in writing of this change.		
Al 11/h	9/36/13		
Menatur of Registered Agent	Date T		
If signing on behalf of an entity:	2: 23 ORID		
Jeffrey J. Sjobeck	<u> </u>		
Typed or Printed Name			

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