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(((H24000050225 3)))



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Division of Corporations

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Account Name : CAPITOL CORPORATE SERVICES, INC.

Account Number : I20160000048 Phone : (800)345-4647 Fax Number : (800)432-3622

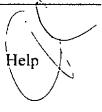
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REGISTERED AGENT CHANGE TARBERT FLORIDA, INC.

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

statement of change is s	ubmitted for a corporation or	0502, 607.1508, or 617.1508, Florida S ganized under the laws of the State of _ gistered agent, or both, in the State of F	FLORIDA_
1. The name of the com	oration: TARBERT FLO	ORIDA, INC.	
	ddress: 4979 JOEWOOD		
SANIBEL, FL 33957			
3. The mailing address ((if different):		
4. Date of incorporation	/qualification: 12/31/201	3 Document number: P1400	0000536
	address of the current registers f State: (If resigned, enter resi	ed agent and registered office on file wi igned)	th the
SPEN	ISERV, INC.		
201 N	ORTH FRANKLIN STREE	ET STE 2150	•
TAME	PA, FL 33602-5627		_
6. The name and street a (if changed):	uddress of the new registered a	agent (if changed) and /or registered off	2024 F = 3
Capito	ol Corporate Services, Inc		: - !
515 E	ast Park Avenue 2nd Fl		ڼ
P.O. Box NOT acceptable			
Tallah	assee, FL 32301		. <u>.</u>
The street address of its as changed will be iden	registered office and the strictal.	ect address of the business office of its	ယ s registered agent
Such change was autho authorized by the board	rized by resolution duly ador l, or the corporation has been	oted by its board of directors or by an inotified in writing of the change.	officer so
	Paul J. Hanky	Paul J. Hanley Authorized Agent	
Signature of an off	ficer or director	Printed or typed name and bit	le .
I hereby accept the app I further agree to comp of my duties, and I am I document is being filed corporation has been n	ointment as registered agent ly with the provisions of all s amiliar with and accept the merely to reflect a change ir otified in writing of this char	and agree to act in this capacity statutes relative to the proper and com obligation of my position as registered n the registered office address, I hereb ige.	plete performance I agent. Or, if this y confirm that the
3in-7	Parlater"	2/5/2024 Date	
Signature of R	legistered Agent	Date	<u> </u>
If signing on behalf of a	an entity:		
Brian Radecki, Assis		of Capitol Corporate Services, Inc.	
- 76 0.00		FEE: \$35.00 * * *	
		FLORIDA DEPARTMENT OF STATE 5, P.O. BOX 6327, TALLAHASSEE, FL 3	32314