

P14000014298

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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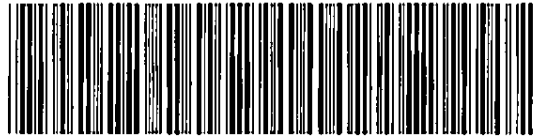
(Business Entity Name)

(Document Number)

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COGENCYGLOBAL

115 N CALHOUN ST., STE. 4
TALLAHASSEE, FL 32301
866.625.0838
COGENCYGLOBAL.COM

Date: 10/26 '2017

Account#: I20000000088

Name: Merritt Knickle

Reference #: C020374

Entity Name: CENTER FOR STUDENT LOAN RELIEF, INC.

☐ Articles of Incorporation/Authorization to Transact Business

☐ Amendment

☒ Change of Agent

☐ Reinstatement

☐ Conversion

☐ Merger

☐ Dissolution/Withdrawal

☐ Fictitious Name

☐ Other _____

Authorized Amount: \$35

Signature: Merritt Knickle

✪ CORPORATE HQ
COGENCY GLOBAL INC
10 E 40 ST, 10 FL
NY, NY 10016
800.221.0102
+1.212.947.7200

✪ EUROPEAN HQ
COGENCY GLOBAL (UK) LIMITED
REGISTERED IN ENGLAND & WALES
REGISTRY #01072
6 BEVIS MARKS, 1 FL
LONDON EC3A 7BA
+44 (0)20.3786.1090

✪ ASIA PACIFIC HQ
COGENCY GLOBAL (HK) LIMITED
A HONG KONG LIMITED COMPANY
INFINITUS PLAZA, 12 FL
159 DES VOEUX RD CENTRAL
HONG KONG
+852.3975.1803



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**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: CENTER FOR STUDENT LOAN RELIEF, INC.
2. The principal office address: 1850 SOUTH 72ND STREET OMAHA NE 68124
3. The mailing address (if different): _____
4. Date of incorporation/qualification: February 13, 2014 Document number: P14000014298

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)

National Registered Agents, Inc.

1200 South Pine Island Road

Plantation, FL 33324

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

COGENCY GLOBAL INC.

115 North Calhoun St., Suite 4

P.O. Box NOT acceptable

Tallahassee, FL 32301

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.


Signature of an officer or director

President

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.


Signature of Registered Agent

10/26/2017
Date

If signing on behalf of an entity:

Sean Honan, Assistant Secretary

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)

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