## Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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## REGISTERED AGENT CHANGE EAST COAST MANAGEMENT ASSOCIATION INC.

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

Plasmant to the provisions of sactions 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: East Coast Management Association Inc.	
2. The principal office address: 2467 Lane Avenue S, Jacksonville, Florida 32210	
3. The mailing address (if different):	
4. Dete of incorporation/qualification: 7/21/2015 Document number: P15000060722	
<ol> <li>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)</li> </ol>	
Business Flings Incorporated	
1200 South Pine Island Road	PICIAID
Plantation, Florida 33324	
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):	ع س
Stephen Boykins	- ا
2467 Lane Avenue S	0
P.O. Box NOT acceptable	
Jacksonville, Florida 32210	
The street address of its registered office and the street address of the business office of its registered agen as classed will be identical.	t,
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.	
Stephen Boykins, President  President President	
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 duites, and I all 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.	
Steplan Rockins 1/29/2016	
If signing on behalf of an entity:	
Typed or Pristed Name	
* * * FILING FEE: \$35.00 * * *  Make checks payable to Florida Department op State	
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEB, FL 32314  CRIEO45 (03/12)  FOX ANUI+ HILODOO 88993	