(((H210004326303)))



H210004326303ABCV

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA0000000023

Phone : (614)280-3338

Fax Number : (954)208-0845

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

Email Address:

## REGISTERED AGENT CHANGE

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$43.75

NEWTON CFY, INC.

NOV 2 9 2021

A. LUNT

Electronic Filing Menu Corporate Filing Menu

Help

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

		egistered agent, or both, in the State of Florida.
i. The name of	The corporation: Newton CF V, Inc.	
2. The principa	office address: 100 SEBASTIAN INC	DUSTRIAL PLACE, UNIT I SEBASTIAN, FL 32958
		Section 1997
	address (if different):	
4. Date of inco	rporation/qualification: 06/21/2018	Document number: P18 00@55431
	nd street address of the current register artment of State: (If resigned, enter re	red agent and registered office on file with the signed)
	SAUTTER, C. CHRISTIAN	
	2850 N ANDREWS AVE WILTON	MANORS, FL 33311
		·
6. The name at (if changed):	nd street address of the new registered	agent (if changed) and /or registered office
	1200 South Pine Island Road	THE EXECUTION AND ADDITION OF THE SECRETARY AND SECRETARY AND SECRETARY AND ADDITIONS
	P.I	O Box NOT acceptable
	Plantation, Florida 33324	
The street addess changed will	ress of its registered office and the st If be identical.	reet address of the business office of its registered agent,
Carali aliani i	vas authorized by resolution duly add the board, or the corporation has bee	opted by its board of directors or by an officer so in notified in writing of the change.
authorized by		
authorized by	This .	Michael Thompson, Associate General Counsel
Mind)	Ture of an director	Printed or typed name and title
I hereby accept further agree of my duties, a comment is be	of the appointment as registered agent to comply with the provisions of all mid I am familiar will and accept the eing filed merely to reflect a change is been notified in writing of this change on System	Primed or types name and title at and agree to act in this capacity. statutes relative to the proper and complete performance obligation of my position as registered agent. Or, if this in the registered office oddress, I hereby confirm that the
I hereby accept further agree of my duties, a corporation he C T Corporatio	of the appointment as registered agent to comply with the provisions of all mail am familiar with and accept the ging filed merely to reflect a change as been notified in writing of this channels.  Shary McGraus	Printed or typed name and title st and agree to act in this capacity, statutes relative to the proper and complete performance obligation of my position as registered agent. Or, if this in the registered office address, I hereby confirm that the inge.  11/22/2021
I hereby accept further agree of my duties, a corporation he C T Corporatio	of the appointment as registered agent to comply with the provisions of all rice and accept the provisions of the provision and accept the provision of the	Printed or typed name and title at and agree to act in this capacity, statutes relative to the proper and complete performance obligation of my position as registered agent. Or, if this in the registered office address, I hereby confirm that the tuge.
I hereby accept further agree of my duties, a corporation he C T Corporatio	of the appointment as registered agent to comply with the provisions of all med I am familiar will and accept the eing fleet merely to reflect a change is been notified in writing of this channels.  Skurry Metanus  Ignature of Registered Agent  we half of an entity:	Printed or typed name and title at and agree to act in this capacity, statutes relative to the proper and complete performance obligation of my position as registered agent. Or, if this in the registered office orderess, I hereby confirm that the inge.  11/22/2021

MARE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (04/13)

Ву: