Electronic Filing Cover Sheet

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To:

CSC TRANS02

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : CORPORATION SERVICE COMPANY

Account Number : I20000000195 Phone : (850)521-0821 Fax Number : (850)558-1515

*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 ALISAR FLORIDA CORP

Certificate of Status	0
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SEP 1 4 2020

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COVER LETTER

TO:	Registration Section Division of Corporations				
en pi	ECT:	ALISAR FLC	DRIDA CORP		
SUDO		Name of Alica Bus	siness Organization)		
Dear :	Sir or Madam:				
	nclosed Statement of Change of are submitted for filing.	Registered Agent/	Registered Office for Alien Business Organizatio	n and	
Please	e return all correspondence conce	erning this matter	to the following:		
	Charles M. LeScha	sk			
	(Name of Person)			
	CUMMINGS & LOCKWO	OOD LTC		20 S	
	(Firm/Company)			, io	
	Six Landmark Square, 9t	th Floor			<
****	(Address)			- 3.C	:
	Stamford, CT 06901			200	
	(City/State and Zip Co	ode)			
For fu	orther information concerning thi	s matter, please ca	all:		
	Charles M. LeSchack	203 at (351-4418		
	(Name of Person)		e & Daytime Telephone Number)		
	Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303		
Enclo	sed is a check for the following	amount:			
□ \$3.5	5.00 Filing Fee		☐ \$43.75 Filing Fee & Certified Copy		
INHS	23 (08/05)				

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STATEMENT OF CHANGE OF REGISTERED AGENT AND/OR REGISTERED OFFICE FOR ALIEN BUSINESS ORGANIZATION

PURSUANT TO SECTION 607.0505, FLORIDA STATUTES, THE UNDERSIGNED ALIEN BUSINESS ORGANIZATION SUBMITS THE FOLLOWING STATEMENT IN ORDER TO CHANGE ITS REGISTERED OFFICE AND/OR REGISTERED AGENT:

ι. ^Α	ALISAR FLORIDA CORP	
_	(Nanz of alien business organization)	
2	12/19/2018 3. P18000101923 4. N/A (Florida registration date) (Florida document number) (FEI Number, if app	
		olicable)
5. <u> </u>	632 WHITE PELICAN WAY, JUPITER, FL 33477	
	(Principal office address)	
6. N	Name and address of registered agent and office currently on record with this office:	
	CLASP INC.	
	11760 US HWY 1, STE 502W	
	PALM BEACH GARDENS, FL 33408	07.
7. ħ	New registered agent and/or office address:	12
	Corporation Service Company	
	1201 Hays Street	
	Tallahassee, FL 32301	
	(Note: Registered office must be a Florida street address)	
1 ¹	The street address of the registered office and the street address of the business office of the egistered agent are identical. Such change was authorized by the board of directors or an officer of the corporation so authorized by the board of directors.	re e
10.	William R. Brand J. (Signature of chairman, vice chairman, or office)	
	William F. Brandt, Jr., President	
II.	(Name and capacity of person signing in number 10 above)	
12.	Signature of new registered agent, if applicable: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of section 607.0505, Florida Statutes.	
	Annuale & Plane 09/11/2020	
_	(Registered agent accepting appointment) (Date	1)

FILING FEE: \$35.00

Make checks payable to Florida Department of State and mail to: Division of Corporations P. O. Box 6327 - Tallahassee, FL 32314

INHS23 (08/05)