

P21 000 105 249

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



400393527414

FILED

2022 OCT 21 AM 9:29

CLERK OF STATE
TALLAHASSEE, FL

RECEIVED

2022 OCT 21 PM 3:54

CLERK OF STATE
TALLAHASSEE, FLORIDA

A. BUTLER

OCT 24 2022

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 066814 4321040

AUTHORIZATION :

COST LIMIT : \$ 35.00

ORDER DATE : October 21, 2022

ORDER TIME : 1:39 PM

ORDER NO. : 066814-010

CUSTOMER NO: 4321040

CHANGE OF AGENT

NAME: HANNOVER SECURITIES COMPANY

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

____ CERTIFIED COPY
XX ____ PLAIN STAMPED COPY

CONTACT PERSON: Eyliena Baker -- EXT#

EXAMINER: _____

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Hanover Securities Company
Name of Corporation

DOCUMENT NUMBER: P21000105249

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Mary Golonka

Name of Contact Person

ArentFox Schiff LLP

Firm/Company

233 South Wacker Drive, Suite 7100

Address

Chicago, IL 60606

City/State and Zip Code

mary.golonka@afslaw.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Mary Golonka

Name of Contact Person

at (312) 258-4604

Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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: Hanover Securities Company
2. The principal office address: 1515 Ringling Boulevard, Suite 1100, Sarasota, FL 34236
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 05/11/1923 Document number: P21000105249
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)

Michele L. Miller

1515 Ringling Boulevard, Suite 1100

Sarasota

FL 34236

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

Corporation Service Company

1201 Hays Street

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.

Michele Miller

Signature of an officer or director

Michele L. Miller

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.

Corporation Service Company

Eileen O'Neil

Assistant Vice President

Signature of Registered Agent

10/21/2022

Date

If signing on behalf of an entity:

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 (04/13)

FILED
2022 OCT 21 AM 9:29
SECRETARY OF STATE
TALLAHASSEE, FL