Fax Server Sivision of Corporations



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To:

Division of Corporations

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From:

Account Name : CORPORATION SERVICE COMPANY

Account Number: I2000000195 : (850)521-1000 Phone

Fax Number : (850)558-1515

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REGISTERED AGENT CHANGE THE DODSON GROUP INCORPORATED

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Electronic Filing Menu-

Corporate Filing Menu

Help

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

statement of cha	provisions of sections 607.0502, 617.0502 inge is submitted for a corporation organiz er to change its registered office or register	red under the laws of the State of Indi	ana
	the corporation: THE DODSON GROU		<i>1111</i> .
2. The principal	office address:ois St #1701, Indianapolis, TN 46204		
	address (if different):		
4. Date of incorp	poration/qualification: 06/26/1992	Document number: P39436	
	t street address of the current registered agreement of State:	cut and registered office on file with th	ne
,	NRAI Services, Inc.		
	2731 Executive Park Drive, Suite 4		
	Weston, F1. 33331		
6. The name and (if changed):	1 street address of the new registered agent Comporation Service Company	(if changed) and /or registered office	r
	1201 Hays Street	and the state of t	
	(P.O. Box NOT acceptable)		
	Tallahassee, FL 32301	ماشت. رس _{انه} پردوند و به شود و به پورند و واقع دانگششتا شاند انتخاب استان بازد و استان بازد و و بازد و و استان و استان	
The street address changed will	ess of its registered office and the street a be identical.	iddress of the business office of its re	gistered agent.
Such change wi authorized by th	as authorized by resolution duly adopted he board, on the corporation has been not	by its board of directors or by an off ified in writing of the change,	icer so
	2 Lucon	James R. Dodson	CEO
I hereby accept I finither agree of my delies, and alocument is being acceptant to here corporation has Corporation	the appointment as registered agent and to comply with the provisions of all status of a line and accept the obligations of all status of a line and accept the obligation of the obligation of the accept the obligation of the accept the obligation of the change of this change. On Service Company	(Printed as typed comes and tries) I agree to act in this capacity, less relative to the proper and comple getion of my position as registered us registered office address, I hereby of	te performance ent. Or, if this onfirm that the
By: 87/2	name of Refusioned Aguna)	7-23-2018	
•	shalf of an entity:	[12,100]	
Sylvia Queppi	et, Asst VP		
t)	Cyped or Primod Name)		
	* * * FILING FE	E: \$35.00 * * *	

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSER, FL 32314
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