

P95000097143

Cygnus Group, Inc.
P.O. Box 6687
Lakeland, FL 33807-6687

City/State/Zip

Phone #

Office Use Only

97 DEC -5 AM 8:28
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. _____ (Corporation Name) _____ (Document #)
2. _____ (Corporation Name) _____ (Document #) 6000002365296-3
-12/08/97-01046--005
*****35.00 *****35.00
3. _____ (Corporation Name) _____ (Document #)
4. _____ (Corporation Name) _____ (Document #)

☐ Walk in

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DIVISION OF CORPORATIONS

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/ Director
<input checked="" type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

CORPORATION

12-5-97

Examiner's Initials

CC



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

November 24, 1997

CYGNUS GROUP, INC.
P.O. BOX 6687
LAKELAND, FL 33807-6687

SUBJECT: CYGNUS GROUP, INC.
Ref. Number: P95000097143

We have received your document for CYGNUS GROUP, INC. . However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The document must be signed by the chairman, any vice chairman of the board of directors, its president, or another of its officers.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6903.

Cheryl Coulliette
Document Specialist

Letter Number: 697A00056159

Florida Department of State, Sandra B. Mortham, Secretary of State

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR
REGISTERED AGENT OR BOTH FOR COOT IONS**

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, the undersigned corporation organized under the laws of the State of _____ submits the following statement in order to change its registered office or registered agent or both, in the State of Florida.

1. The name of the corporation is: Cygnus Group, Inc.
2. The mailing address of the corporation is: P.O. Box 6687, Lakeland, FL 33807
3. Date of incorporation/qualification: _____ Document number: _____
4. The name and address of the current registered agent and office:
John A. Attaway, Jr.
One Lake Morton Drive
Lakeland, FL 33801
5. The name and address of the new registered agent and office: (P.O. Box Not Acceptable)
Arthur J. Roth
6700 South Florida Ave. Suite 9
Lakeland, FL 33813

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.

(Signature of an officer, chairman or vice chairman of the board)

November 12, 1997

(Date)

Arthur J. Roth President

(Printed or typed name and title)

Having been named as registered agent and to accept service of process for the above stated corporation, 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.

(Signature of Registered Agent)

November 12, 1997

(Date)

If signing on behalf of an entity:

ARTHUR J. ROTH
(Typed or Printed Name)

PRESIDENT

(Capacity)

CR2E045(1/95)

FILING FEE: \$35.00

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TALLAHASSEE FLORIDA