P9600005564D Requester's Name Address City/State/Zip Phone # Coronella, Inc. (Corporation Name) (Document #) (Corporation Name) (Document #) (Corporation Name) (Document #) ☐ Pick up time Walk in Certified Copy ☐ Mail out ☐ Will wait Photocopy Certificate of Status **NEW FILINGS** <u>AMENDMENTS</u> ☐ Profit Amendment Not for Profit Resignation of R.A., Officer/Director ☐ Limited Liability Change of Registered Agent Domestication Dissolution/Withdrawal Other Merger **OTHER FILINGS** REGISTRATION/QUALIFICATION Annual Report Fictitious Name ☐ Limited Partnership Reinstatement Trademark Other

CR2E031(7/97)

**Examiner's Initials** 

Flerida Deportrosso of State, Sandra B. Mortham, Secretary of State

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

Pursuant to the residences of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Stat	utes, the
widerale series allow involved under the rises of the State of Florida structured in the state of fire or registered agent, or both the fire of the state of the	th in the
	n, in me
1 The normal the comportation is: Cotonella, Inc.	The same of the sa
2. The mailing address of the corporation is: P, O, Box 5705.  Lake Worth, FL 33466-	5705
3. Date of incorporation/qualification:/w/e 28, /996 Document number: P96000	1055640
4. The name and address of the current registered agent and office:  William G. Sawyer Tr.	00
Marie FL 33/56	
William G. Sawyer Tr.	M   1   1   26
The street address of its registered office and the street address of the business office of its regiagent, as changed, will be identical.	stered
Such change was authorized by resolution duly adopted by its board of directors or by an office authorized by the board.	
(Signature of an officer, chairman or vice chairman of the board) (Date)	
William & Sawyer IF, President 11/8/99 (Date)	
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 capa 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.	city.
William J. Surger Tr. 1/8/99 (Date)	 
If signing on behalf of an entity:  William C. Sawyer Tr. President (Capacity)	
(RZE045(4/95)) FILING FRE: \$35.  Mail to 10 60x 6327  Tallaharsee; FL 32314	.00
Mare to 1000 FL 32314	
Janana in	