P98000003724

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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificate	s of Status
Special Instructions to	Filing Officer:	
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SECRETARY OF STATE
SECRETARY OF

COVER LETTER

TO:	Amendment Section Division of Corporation	ns				
SUBJE	COA	dvantage Resources 2	O, Inc.			
DODOL		Name of 0	Corporation			
DOCU	MENT NUMBER:	P98000003724				
The en	closed Statement of Cha	nge of Registered Offi	ce/Agent and fee are submitted for	or filing.		
Please	return all correspondenc	e concerning this matte	er to the following:			
		Darlene Lemke				
		Name of Co	ontact Person	_		
		CoAdvantage				
		Firm/C	ompany			
		111 W Jefferson S	St Iress			
		Auc	11 C22			
		Orlando, FL 3280				
	· · · · · · · · · · · · · · · · · · ·	City/State a	nd Zip Code	_		
		dlemke@coadvan				
	E-mail add	ress: (to be used for t	future annual report notification	n)		
For furt	her information concern	ing this matter, please	call:			
	Darlene Lemke		at (407) 447-1895 Area Code & Daytime Te			
	Name of Contac	t Person	Area Code & Daytime Te	lephone Nur	nber	
Enclose	ed is a \$35.00 check mad	e payable to the Depar	tment of State.	,		
			•	TAL SE	ದ	
		Address:	Street Address:	CRE	13 OCT	-
		lment Section on of Corporations	Amendment Section Division of Corpora		<u>극</u>	=
		ox 6327	Clifton Building	Sellon	_	F
		assee, FL 32314	2661 Executive Cen Tallahassee, FL 323	' 1	PH 12:	Ţ

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

	•	607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this corporation organized under the laws of the State of FLORIDA
in orde	er to change its register	red office or registered agent, or both, in the State of Florida.
1. The name of	the corporation:	CoAdvantage Resources 20, Inc.
2. The principal office address:		3350 Buschwood Park Drive - Ste 200
		Tampa, FL 32801
3. The mailing address (if different):		111 W Jefferson St
	`	Orlando, FL 32801
4. Date of incor	poration/qualification:	1/12/1998 Document number: P98000003724
	d street address of the c rtment of State: (If resi	current registered agent and registered office on file with the gned, enter resigned)
	Mark Lowrey	
	111 W Jefferso	on Street
	Orlando, FL 3	2801
6. The name and (if changed):	l street address of the n Jeffrey J. Sjobe	new registered agent (if changed) and /or registered office
	3350 Buschwo	P.O. Box NOT acceptable
	Tampa, FL 33	·
as changed will	be identical.	fice and the street address of the business office of its registered agent,
authorized by th	is authorized by resolute board, or the corport	ation duly adopted by its board of directors or by an officer so ration has been notified in writing of the change.
Ш.	<u>u</u>	Miguel A. Maseda, President/€EO
I hereby accept I further agree t	o coninly with the pro	gistered agent and agree to act in this capacity. gistered agent and agree to act in this capacity. gistered agent and agree to act in this capacity. gistered agent and agree to act in this capacity. gistered agent and agree to act in this capacity. gistered agent and agree to act in the proper and complete amiliar with and accept the obligation of my position as fagistered iled merely to reflect a change in the registered office address, as been notified in writing of this change.
,	Alli.	9/20/13
Sigr	attere of Registered Agent	Date 25
If signing on bel	half of an entity:	
Jef	frey J. Sjobeck	
Ту	ped or Printed Name	

* * * FILING FEE: \$35.00 * * *