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(Re	questor's Name)	
(Ad	dress)	
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(Cit	ty/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
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(Do	ocument Number)	
Certified Copies	_ Certificate:	s of Status
Special Instructions to Filing Officer:		
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FLORIDA DEPARTMENT OF STATE Division of Corporations

March 24, 2017

COMMUNITY CREDIT UNION FLORIDA (CCU) ATTN: LESLIE DOOLEY 1030 S US HWY 1 ROCKLEDGE, FL 32955

SUBJECT: COMMUNITY CREDIT UNION OF FLORIDA

Ref. Number: W17000025364

We have received your document for COMMUNITY CREDIT UNION OF FLORIDA and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

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) 245-6051.

Deborah Bruce Regulatory Specialist II

Letter Number: 817A00005677

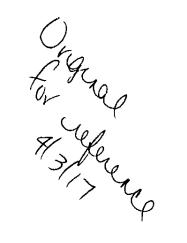
2017 APR -6 P 3: 51
SECRETARY OF STATE

2011 APR -5 AM 11: 38



March 7, 2017

Department of State
Division of Corporations
ATT: Amendment Section
P.O. Box 6327
Tallahassee, FL 32314



Community Credit Union of Florida (CCU) wishes to designate a place and registered agent as its sole location and agent for service of process. The document number for CCU is 60816. The Name and Address of the Registered Agent is:

- Nancy Spencer, Primary
 1030 US Highway 1, Rockledge, FL 32955
- Dawn Anderson, Secondary
 1030 US Highway 1, Rockledge, FL 32955

I, Nancy Spencer agree to be the primary appointment of the designated registered agent for service of process for Community Credit Union of Florida.

I, Dawn Anderson, agree to be the secondary appointment of the designated registered agent for service of process for Community Credit Union of Florida.

A check for \$35 is enclosed for processing this designation request. If you have any questions or need additional information, please contact Lesli Dooley, at 321.637.3141.

Sincerely,

Lesli Dooley,

VP of Organizational Development

SECHETARY OF STATE

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Connumity Credit Lynn of Florida (Name of Alien Business Organization or Financial Institution)
Dear Sir or Madam:
The enclosed Designation of Registered Agent and Registered Office for Alien Business Organization or Financial Institution and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
(Name of Person)
Community Credit Union of Florida (Firm/Company)
1030 SUS Highway 1
Ruckledge N 32955 (City/State and Zip Code)
For further information concerning this matter, please call: Lett Dooling
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building P.O. Box 6327 Clifton Building Tallahassee, Florida 32301 Registration Section Division of Corporations Tallahassee, Florida 32314
Enclosed is a check for the following amount: D \$35.00 Filing Fee

DESIGNATION OF REGISTERED AGENT AND REGISTERED OFFICE FOR ALIEN BUSINESS ORGANIZATION OR FINANCIAL INSTITUTION

PURSUANT TO SECTION 607.0505 OR 655.0201, FLORIDA STATUTES, THE UNDERSIGNED ALIEN BUSINESS ORGANIZATION OR FINANCIAL INSTITUTION SUBMITS THE FOLLOWING STATEMENT IN ORDER TO DESIGNATE ITS REGISTERED AGENT AND REGISTERED OFFICE IN THE STATE OF
FLORIDA:
1. Community (Name of alien business organization or financial institution)
2. Fluvida 3. 59 - 08(07(08) (FEI Number, if applicable)
(State or country under which entity is organized) (FEI Number, if applicable)
4. 1030 5 US Highway Ruckledge, Fr. 32955
5. Name and Florida Street address of registered agent.
nancy Spencer, Primary
1030 Sus Highway 1
Rockledg, Fl 32999
6. The street address of the registered office and the street address of the business office of the registered agent are identical.
7. Signature of chairman, vice chairman, or officer)
8. Lesti Doolly, VP of Organizational Developments (Name and capacity of person signing in number 7 above)
(Name and capacity of person signing in number 7 above)
9. Signature of registered agent: / ancy Spencer
I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of section 607.0505 or 655.0201, Florida Statutes.
Mancy & Spencer 4/3/17
(Registered agent accepting appointment) (Date)
THE FILING OF THIS FORM WITH THE FLORIDA DEPARTMENT OF STATE DOES NOT AUTHORIZE THE ABOVE REFERENCED ENTITY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.
FILING FEE \$35
Make checks payable to Florida Department of State and mail to: