## 

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	:#)
PICK-UP	WAIT	MAIL.
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
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n BRUCE JUL 05 2017

## **COVER LETTER**

то:	Registration Section Division of Corporations				
SUB	JECT: Central Credit Union of Name of Alien Busin		on or Financial Institution)	<u>.</u>	
Dear	Sir or Madam:				
	enclosed Designation of Registered acial Institution and fee(s) are subm			siness Organization	or
Pleas	e return all correspondence concern	ning this matte	er to the following:		
Mag	gie Conaghan				
	(Name of Person)				
Cen	tral Credit Union of Florida				
	(Firm/Company)		<del></del>		
P.O	. Box 17048			TA <sub>S</sub>	
	(Address)			2017 JUL SECRETA ALLAHA	ال.
Pen	sacola, FL 32522			IL -3	
	(City/State and Zip Coc	le)		ro _	
For f	urther information concerning this	matter, please	call:	P 12: 04 F STATE FLORIDA	
Мас	ggie Conaghan	850 at (	474-0970 x3275		
	(Name of Person)		ode & Daytime Telephone N	umber)	
Regis Divis Clifts 2661	EET/COURIER ADDRESS: stration Section sion of Corporations on Building Executive Center Circle hassee, Florida 32301	Re Di P.	egistration Section vision of Corporations O. Box 6327 dlahassee, Florida 32314		
Encl	osed is a check for the following	amount:			
□ \$3	5.00 Filing Fee		■ \$43.75 Filing Fee & C	Certified Copy	

## 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. Central Credit Un	(Name of alien business organization or financia	(institution)
<sub>2</sub> Florida	ander which entity is organized)  3. 59-1009534  (FEI Number, if applicable)	
(State or country u	nder which entity is organized)	(FEI Number, if applicable)
1200 East Nine N	file Road, Pensacola, FL 32514	
T	(Principal office address)	
5. Name and Florida Str	reet address of registered agent.	
	Carolyn G. Dwelle	<u> </u>
	1200 East Nine Mile Road	
	Pensacola, FL 32514	
are identical.  7. Andrea Krieger, 6  9. Signature of registers	ed agent: (Name and capacity of person signing in number of agent: Dull pointment as registered agent. I am familiar v	officer)  SECRETARY OF STATE  officer)  Der 7 above)  Let 0

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: Division of Corporations P. O. Box 6327 Tallahassee, FL 32314