## F22000003480

(Requestor's Name)					
(Address)					
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(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
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Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					

Office Use Only



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RA & RO Change



NECEIVED

A. RAMSEY MAR 45, 2024 CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Phone: 850-558-1500

ACCOUNT NO. : 12000000195				
REFERENCE : 354105 8443773				
AUTHORIZATION : Soulle san				
COST LIMIT : \$35.0				
ORDER DATE : March 6, 2024				
ORDER TIME : 5:0 PM				
ORDER NO. : 354105-007				
CUSTOMER NO: 8443773				
CHANGE OF AGENT				
NAME: DELTA WATERFOWL FOUNDATION				
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:				
CERTIFIED COPY XX PLAIN STAMPED COPY				
CONTACT PERSON: Shauna Godbolt				

EXAMINER'S INITIALS:

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

statement of cha	provisions of sections 607.0502, 617.050 nge is submitted for a corporation organ r to change its registered office or regist	nized under the laws of the State of $\underline{\ }$	DC	
1. The name of the	he corporation: DELTA WATERFOWL I	FOUNDATION		
	office address: 1412 BASIN AVE BISM			
3. The mailing a	ddress (if different):		<del></del>	
4. Date of incorp	oration/qualification: 05/13/2022	Document number: F22000	003480	
	street address of the current registered a tment of State: (If resigned, enter resign	-	th the	
	C T CORPORATION SYSTEM			
1200 SOUTH PINE ISLAND ROAD				
	PLANTATION	FL 33324	124 H	
6. The name and (if changed):	ent (if changed) and /or registered off	2024 HAR I II PH 12		
	Corporation Service Company		7.00 <b>7.00</b>	
	1201 Hays Street		温 5	
P.O. Box NOT acceptable				
	Tallahassee	FL 32301		
The street addreas changed will	ss of its registered office and the street be identical.	address of the business office of its	s registered agent.	
Such change wa authorized by th	s authorized by resolution duly adopte e board, or the corporation has been no	d by its board of directors or by an otified in writing of the change.	officer so	
/s/ Jill Cilmi		Jill Cilmi	Vice President	
Signatur	e of an officer or director	Printed or typed name and tit	le	
l further agree to of my duties, and document is beir corporation has	the appointment as registered agent and comply with the provisions of all stated I am familiar with and accept the oblig filed merely to reflect a change in the been notified in writing of this change in Service Company	nd agree to act in this capacity. tutes relative to the proper and com ligation of my position as registered ne registered office address, I hereb	plete performance l agent. Or, if this y confirm that the	
By: Xmc. LKubl Signature of Registered Agent		3/12/2024		
-		Date		
If signing on bel	-			
	Asst Vice President ped or Printed Name			
.,	* * * FILING FI	EE: \$35.00 * * *		

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (04/13)
CSC 354105-7