REGISTERED AGENT STATEMENT OF APPOINTMENT

OFFICE USE ONLY

(Section 106.022, F.S.)		RECD SOE FEB 19 '19 pm 9:48	
(0000011 100.022, 1 .0.)			
Original Appointment Change of Appointment	ntment		
☐ Change of Mailing Address ☐ Change of Physic	al Address		
Registered Agent and Office Information			
Name James C. Alberdi		Telephone 813-485-8110	
Street Address 3210 E. 7th Avenue			
City Tampa	State Florida	Zip Code 33605	
Mailing Address PO Box 172536			
City Tampa	State Florida	Zip Code 33672	
I accept this appointment and confirm that I am familiar with and accept the obligations of the position as set forth in Section 106.022, F.S. I also understand that I may resign this appointment by executing a written statement of resignation and filing it with the applicable filing officer.			
Jan Callect.		2/13/19	
Signature of Registered Agent Date			
Former Registered Agent and Office Information (for changes only)			
Name		Telephone	
Street Address			
City	State	Zip Code	
Committee or Organization Information			
Name of Committee or Organization			
Tampa's Bright Future			
Street Address 3210 E. 7th Avenue		Telephone 813-485-8110	
City Tampa	State Florida	Zip Code 33605	
Jan L allest			
Signature of Chairperson			
James C Alberdi		2/13/19	
Printed Name of Chairperson		Date	