

**REGISTERED AGENT
STATEMENT OF APPOINTMENT**
(Section 106.022, F.S.)

OFFICE USE ONLY

RECEIVED

AUG 03 2020

DUVAL COUNTY ELEC.
By LL

☒ Original Appointment ☐ Change of Appointment
☐ Change of Mailing Address ☐ Change of Physical Address

Registered Agent and Office Information

Name Joey Stevens Telephone 904-832-7293

Street Address 6081 Davon Street

City Jacksonville State FLORIDA Zip Code 32244

Mailing Address

City Jacksonville State FLORIDA Zip Code

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.

[Signature]
Signature of Registered Agent

July 28, 2020
Date

Former Registered Agent and Office Information (for changes only)

Name Telephone

Street Address n/a

City State Zip Code

Committee or Organization Information

Name of Committee or Organization Save the School Names, org

Street Address 4530 St. John Avenue, Suite 15 - Box 230 Telephone 904-832-7293

City Jacksonville State FL Zip Code 32210

[Signature]
Signature of Chairperson

Robert Lawrence
Printed Name of Chairperson

July 28, 2020
Date