

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

OFFICE USE ONLY

RECEIVED

FEB 18 2021

DUVAL COUNTY ELEC.

By BS

Mail

- Original Appointment Change of Appointment
 Change of Mailing Address Change of Physical Address

Registered Agent and Office Information

Name
Patrick Krechowski Telephone
(904) 393-9000

Street Address
One Independent Drive, Suite 1800

City
Jacksonville State
Florida Zip Code
32202

Mailing Address
One Independent Drive, Suite 1800

City
Jacksonville State
Florida Zip Code
32202

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 of Registered Agent

FEB 11, 2021

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
Thoughtful & Committed Citizens for Jacksonville

Street Address Telephone
One Independent Drive, Suite 1800 (904) 393-9000

City State Zip Code
Jacksonville Florida 32202



Signature of Chairperson

Patrick Krechowski

Printed Name of Chairperson

FEB 11, 2021

Date