REGISTERED AGENT STATEMENT OF APPOINTMENT

(Section 106.022, F.S.)

OFFICE USE ONLY

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DEC 21 2022

DUVAL COUNTY ELEC.
By

☑ Original Appointment ☐ Change of Appointment

☐ Change of Mailing Address ☐ Change of Physical Address

Registered Agent and Office Information

Name		Telephone
Jennifer Casey		904-994-5153
Street Address		
974 Corsica Ln.		
City	**State**	**Zip Code**
Jacksonville	FL	32218
Mailing Address		
731 Duval Station Rd. #107-36		
City	**State**	**Zip Code**
Jacksonville	FL	32218

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.

Jennifer Casey — 12/21/22

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		
Our Jacksonville		
Street Address		**Telephone**
974 Corsica Ln.		904-994-5153
City	**State**	**Zip Code**
Jacksonville	FL	32218

Jennifer Casey

Signature of Chairperson

Jennifer Casey — 12/21/22

Printed Name of Chairperson — **Date**

Form DS-DE 41 (revised 6/11)