744085

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(Requestor's Name)			
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(Address)			
(Address)			
(City/State/Zip/Phone #)			
(,,			
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11/13/08

COVER LETTER

то:	Amendment Section Division of Corporations			
SUBJECT: MIAMI COUNTRY DAY SCHOOL				
(Name of Corporation)				
DOCU	JMENT NUMBER: 744085			
The en	closed Statement of Change of Registered Office/Age	nt and fee are submitted for filing.		
Please	return all correspondence concerning this matter to the	e following:		
	JOHN DAVIES			
(Name of Contact Person)				
HEAD, MIAMI COUNTRY DAY SCHOOL				
(Firm/Company)				
601 N.E. 6th AVE				
(Address)				
Miami FI 33238-7608				
(City/State and Zip Code)				
For fur	rther information concerning this matter, please call:			
Osmor	nd C. Howe, Jr.	786) 218-6597		
	(Name of Contact Person)	(786) 218-6597 (Area Code & Daytime Telephone Number)		
Enclose	ed is a \$35.00 check made payable to the Department	of State.		
	Mailing Address:	Street Address:		
	Mailing Address: Amendment Section	Amendment Section		
	Division of Corporations	Division of Corporations		
	P.O. Box 6327	Clifton Building		
	Tallahassee, FL 32314	2661 Executive Center Circle		
		Tallahassee, FL 32301		

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

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida in order to change its registered office or registered agent, or both, in the State of Florida.	_
1. The name of the corporation: Miami Country Day School , Inc.	
2. The principal office address: 601 N.E. 6th Ave Miami Fl 33238-7608	
3. The mailing address (if different): Same	
4. Date of incorporation/qualification: 08/31/1978 Document number: 744085	
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:	
Howe,Osmond C. Jr.	
501 Brickell Key Drive Suite 504	
Miami FI 33131	7
6. The name and street address of the new registered agent (if changed) and /or registered office.	
(if changed): Howe,Osmond C. Jr.	الاستيكا
2000 Towerside Terr. Suite 402	
(P.O. Box NOT acceptable) Miami, FI 33138-2223	
The street address of its registered office and the street address of the business office of its registered ag as changed will be identical.	ent,
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.	
Signature of an officer of director) John Davies Ed. D. (Printed or typed name and title)	_
Thereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performs of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if document is being filed merely to reflect a change in the registered office address, I hereby confirm that corporation has been notified in writing of this change.	ince this the
August 25, 2008	
(Signature of Registered Agent) (Date) If signing on behalf of an entity:	
(Typed or Printed Name)	

* * * FILING FEE: \$35.00 * * *