

## Florida Department of State

Division of Corporations
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To:

Division of Corporations

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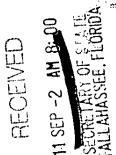
From:

Account Name : CORPORATION SERVICE COMPANY

Account Number : I20000000195 Phone : (850)521-1000 Fax Number : (850)558-1515

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

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## REGISTERED AGENT CHANGE GREENPEACE FUND, INC.

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Estimated Charge	\$35.00

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Corporate Filing Menu

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

statement of cha	unge is submitted for a corporation organ	102, 607.1508, or 617.1508, Florida Statutes, this mized under the laws of the State of CA tered agent, or both, in the State of Florida.
	the corporation: GREENPEACE FUN	
2. The principal	office address: 702 H Street NW, Sui	te 300, Washington DC 20001
3. The mailing a	address (if different):	
4. Date of incorp	poration/qualification: 5/18/2007	Document number: F070000002665
5. The name and		agent and registered office on file with the
	CT Corporation System	
	1200 South Pine Island Road	2 /
	Plantation FL 33324	9
6. The name and (if changed):	d street address of the new registered age	nt (if changed) and /or registered office
	Corporation Service Company	
	1201 Hays Street	
	(P.O. Box NOT acceptable	)
	Tallahassee, FL 32301	
The street addreas changed will	ess of its registered office and the street be identical.	address of the business office of its registered agent,
		ed by its board of directors or by an officer so of of the change.
7	Mauren Cothell	Maureen Cathell, Vice President
	ure of an officer or director)	(Printed or typed name and title)
I hereby accept I further agree to of my duties, and document is bei corporation has	the appointment as registered agent at to comply with the provisions of all stated I am familiar with and accept the ob- ing filed merely to reflect a change in the s been notified in writing of this change	nd agree to act in this capacity, httes relative to the proper and complete performance ligation of my position as registered agent. Or, if this ne registered office uddress, I hereby confirm that the
	on Service Company ರಿಹಾಸಿಕ್ಕೂ	August 26, 2011
<b>-</b>	gnature of Registered Agent)	(Date)
If signing on be	chalf of an entity:	
Grace E. Kirb	y Assistant Vice President	
	Typed or Printed Name)	
	* * * FILING F	EE: \$35.00 * * *

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (8/05)