NO2 00 0009957

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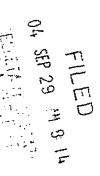


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03/29/04--01048--001 **35.00

1/A Change



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

Pursuant to the	e provisions of sections 607.0502, 6	17.0502, 607.1508, or 617.1508	8, Florida Statutes,
this statement o	f change is submitted for a corporati	on organized under the laws of t	he State of
Florida		red office or registered agent, o	_
of Florida.	, -		F 8 8 7
1. The name of	the corporation: THE NEW BLANK F.	AMILY FOUNDATION, INC.	25
2. The principal	office address: 3455 NW 54 ST, MIA	MI FL 33142	
·			20, 0
3. The mailing	address (if different):		10000000000000000000000000000000000000
4. Date of incor	poration/qualification: 12/30/2002	Document number:	N02000009959
	d street address of the current register rtment of State:	ed agent and registered office or	i file with the
	NORMAN J SILBER		
	701 BRICKELL AVENUE SUITE 190	0	
	MIAMI FL 33131		
6. The name and changed):	nd street address of the new register CorpDirect Agents, Inc.	red agent (if changed) and /or r	egistered office (if
,	103 N. Meridian St.	", " ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '	
	(P.U. Box of personal man	Ibox NOT acceptable)	 .
	Tallahassee, FL 32301		
The street addreagent, as chang	ess of its registered office and the streed will be identical.	eet address of the business office	e of its registered
Such change was authorized by	as authorized by resolution duly ado ne board, or the corporation has beer	pted by its board of directors or inciting of the chang	by an officer so
Signature of an officer	, mairman or vice chairman of the board)	Robert Fischer Seeze	tray
	the appointment as registered agent	, , , , , , , , , , , , , , , , , , , ,	
I further agree performance of	to comply with the provisions of all in my duties, and I am familiar with an it. Or, if this document is being filed thereby confirm that the corporation	statutes relative to the proper a nd accept the obligation of my p	nd complete osition as
	18 %	10/4/04	
_ (5	ignature of Registered Agent)	(Date)	,
If signing on behal	f of an entity:	A 0	
Ed Lary	S	Asst. Secretary	
C	Typed or Printed Name)	(Capacity)	

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