NO5000010388

| (Requestor's Name) |
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| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
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| (Business Entity Name) |
| (Business Entity Name) |
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| (Document Number) |
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| Certified Copies Certificates of Status |
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| Special Instructions to Filing Officer: |
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SECRETARY OF STATE

C.COULLIETTE MAR 0 9 2009

EXAMINER

COVER LETTER

TO: Amendment Section Division of Corporations

| SUBJECT: The Emily Vernon Foundation for Homeless and Abused (Name of Corporation) Animals, Inc. |
|---|
| DOCUMENT NUMBER: N05000010388 |
| The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing. |
| Please return all correspondence concerning this matter to the following: |
| AMY B. BELLER, ESQ. (Name of Contact Person) |
| (Name of Contact Person) |
| THE BELLER LAW FIRM, P.A. (Firm/Company) |
| 2101 NW CORPORATE BLVD., #316 (Address) |
| BOCA RATON, FL 33431 (City/State and Zip Code) For further information concerning this matter, please call: |
| AMY B. BELLER at (561) 994-4316 (Name of Contact Person) (Area Code & Daytime Telephone Number) |
| Enclosed is a \$35.00 check made payable to the Department of State. |

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
Clifton Building
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. | |
|---|------------------|
| I. The name of the corporation: The Emily Vernon Foundation for Homeless and Abu | ısed |
| The principal office address: THE BELLER LAW FIRM, P.A. Animals, in | |
| 2101 NW CORPORATE BLVD., #316, BOCA RATON, FL 33431 | - |
| 3. The mailing address (if different): | |
| 4. Date of incorporation/qualification: 10/07/2005 Document number: N05000010388 | |
| 5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned) | |
| TIMOTHY M. HORSTING, ESQ. | |
| 1515 UNIVERSITY DRIVE, SUITE 202 | |
| CORAL SPRINGS, FL 33071 | |
| 6. The name and street address of the new registered agent (if changed) and /or registered office (if changed): | |
| AMY B. BELLER, ESQ | |
| | ⊃ |
| 2101 NW Corporate Blvd., #316, Boca Raton, FL 33431 | a |
| The street address of its registered office and the street address of the business office of its registered ages as changed will be identical. | nt, |
| 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. | |
| Two-thy Could Two-try Chy Low Low (Printed or typed name and title) | |
| I hereby 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 performant of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if the document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change. | 1ce his he |
| (Signature of Registered Agent) (Date) | ~ |
| If signing on behalf of an entity: | |
| (Typed or Printed Name) | |

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

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