

N 98 000005185

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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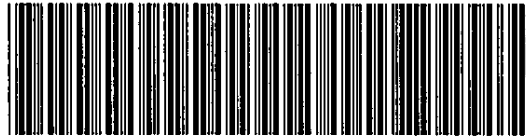
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

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3/30/15

COVER LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: WOMEN OF TOMORROW MENTOR + SCHOLARSHIP PROGRAM  
Name of Corporation

DOCUMENT NUMBER: N98000005185

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:

NORMA LOWE  
Name of Contact Person

WOMEN OF TOMORROW MENTOR + SCHOLARSHIP PROGRAM  
Firm/Company

22 E FLAGLER ST - 6th FL  
Address

MIAMI FL 33131  
City/State and Zip Code

N.Lowe@womenoftomorrow.org  
E-mail address: (to be used for future annual report notification)

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For further information concerning this matter, please call:

NORMA LOWE at (305) 371-3331  
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.

1. The name of the corporation: WOMEN OF TOMORROW MENTOR + SCHOLARSHIP PROGRAM INC.

2. The principal office address: 22 E FLAGLER ST - 6th FLOOR, MIAMI FL 33131

3. The mailing address (if different): SAME AS ABOVE

4. Date of incorporation/qualification: 9/10/98 Document number: N98 000005185

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)

GREEN, JONATHAN H
799 BRICKELL PLAZA STE 700
MIAMI FL 33131 USA

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

J. BIANCA ERILKSON
22 E FLAGLER ST - 6th FLOOR
MIAMI FL 33131

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TALLAHASSEE, FLORIDA

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

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 or director: [Handwritten Signature]
JENNIFER V. VALLOPI - PRESIDENT
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 performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this 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.

Signature of Registered Agent: [Handwritten Signature]
Date: 03/26/2015

If signing on behalf of an entity:
Typed or Printed Name

\*\*\* FILING FEE: \$35.00 \*\*\* -PAID CK # 2319