Myoni DA Somar Re	DE BONAUNT V CICHENBURY questor's Name	9 Col	Rge Four	6
City/State/	Address AM F 33 32	_	Office Use On	ly
1.	NAME(S) & DOCUMENT NUM		4000023 -01/12/ ******	9801121016
•		ocument #		
4		ocument #	,	
Walk in Mail out	Pick up time Will wait Photocopy	ocument #	Certified Copy Certificate of Status	_
NEW-FILINGS	AMENDMENTS			
Profit	Amendment	All activities as	TAL	86
NonProfit	Resignation of R.A., Officer/ Dire	ctor	L AH	R JAN TI
Limited Liability	Change of Registered Agent		ÄSS	A 7 7
Domestication	Dissolution/Withdrawal		<u> </u>	
Other	Merger		E C	AN 12 PM 12: 33
			- 5	Em ω
OTHER FILINGS	REGISTRATION/ QUALIFICATION			
Annual Report	Foreign		1 ~	0 0
Fictitious Name	Limited Partnership		PH	
Name Reservation	Reinstatement		+	
	Trademark			()CYIII
	Other			1119
E031(1/95)		ſ	Examiner's Initials	

CR2E

Florida Department of State, Sandra B. Mortham, Secretary of State

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

	e provisions of se poration organize					08, Florid	a Stai	tutes, the
	lowing statement					ed agent,	or bo	th, in the
-	the corporation is	s: <u>Miami-D</u>	ade Commun	nity Col	lege Fou	ndation	ı, I	nc.
2. The mailing a	address of the cor	poration is :	300 N.E.	Second	Avenue,	Miami,	FL	33132
Date of incor The name and	poration/qualifica d address of the c	tion: 10/2	0/65 ered agent and	Docum	nent number	70978	36	
	Rosen, En	rrol	•		= -	-	-	
	Miami-Dad	de Commun	ity Collec	je Found	ation			•
	300 N.E.	Second A	venue, Mia	ami, FL	33132	SEC	98	-,
5. The name and	d address of the n	ew registered	agent and off	ice: (P.O. I	Box Not Acc	AHDSSEE.	98 JAN 12 PM	
	Miami-Dade Co	ommunity Colle	ege Foundation				2: 3	
	300 N.E. Seco	ond Avenue,	Miami, FL 331	L32		3系	ယ	
	ess of its registered, will be identicated.							
Such change wa authorized by th	s authorized by re e board.	esolution duly	adopted by it	s board of	directors or	by an offic	cer so	
11 instan	Kichter			1/6/	78	-		
Signature of an offi	cer, chairman or vice	chairman of the	board)		(Date)			 -
Winston	Richter		Miami-Dade Con d or typed name a		lege Foundati	on, Inc.	_	
Having been nat I hereby accept comply with the and I am familia	med as registered the appointment of provisions of all ir with and accep				s for the abo this capaci aplete perfor stered agent	ove stated ty. I furth mance of	corpo er åg my di	oration, ree to uties,
· · · · · · · · · · · · · · · · · · ·	of Eichenhe			January 6,	1998			
\ \	of Registered Agent)				(Date)		•	
II signing on bel	half of an entity:							
Rosemary Eicher				Administrat	ive Assistan	t		
(1ypou or	Printed Name)				(Capacity)			

FILING FEE: \$35.00

CR2E045(1/95)