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Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 Phone : (307)200-2803 Fax Number : (813)436-5206

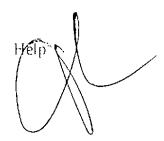
Enter the email address for this business entity to be used for filture annual report mailings. Enter only one email address please.

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REGISTERED AGENT CHANGE NOSSA SENHORA DO MONTE FUNDRAISING CHARITY **FOUNDATIO**

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

statement of cl	te provisions of sections 607,0502, 617,05 hange is submitted for a corporation orga der to change its registered office or regis	mized under the laws of the St	ate ofFL	
1. The name o	of the corporation: <u>NOSSA SENHORA DO</u>		HARITY FOUNDATI	<u>ON I</u> NC
3. The mailing	g address (if different):		75 2 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4	
4. Date of inco	orporation/qualification; 05/13/2022	Document number: _N	N22000004671	
5. The name at Florida Dep	nd street address of the current registered partment of State: (If resigned, enter resign	agent and registered office on acd)	file with the	
	LEGALINC CORPORATE SER	RVICES INC.	_ _	
	476 RIVERSIDE AVE			
	JACKSONVILLE, FL 32202			
6. The name ar (if changed)	nd street address of the new registered ago	em (if changed) and /or registe	red office	
	Northwest Registered Agent LL	.C	~ 2	
	7901 4th St N STE 300	ov NOT acceptable	24FE8	77
	St. Petersburg, FL 33702		—————————————————————————————————————	
The street add	ress of its registered office and the stree il be identical.	t address of the business offic	ce of its register as	
Such change wanthorized by	was authorized by resolution duly adopte the board, or the corporation has been n	ed by its board of directors or officed in writing of the chang	by an officer so	
C. Signai	June of an officer or director	ORLANDO BAL	LA - President	·
I further agree of my duties, a document is bo	ot the appointment as registered agent as e to comply with the provisions of all sta and I am familiar with and accept the ob- eing filed merely to reflect a change in the as been notified in writing of this change	tutes relative to the proper an ligation of my position as reg he registered office address. I	id complete perform istered avent Or i	ance f this t the
	Jenature of Registered Agent	02/14/202	24	
5	gnature of Registered Agent	Date		
If signing on b	behalf of an entity;			
	Taylor Newman Typed or Printed Name			
	rypen or renew rance			