Current Mai PO BOX 14- MIAMI, FL			
FEI Number: 59-1672457			Certificate of Status Desired: No
Name and A	ddress of Current Registered Agent:		
SMITH, C 824 GALIANO S CORAL GABLE	STREET S, FL 33134 US		
The above name	l entity submits this statement for the purpose of changing its reg	stered office or regis	tered agent, or both, in the State of Florida.
SIGNATURE	E C SMITH		01/06/2021
	Electronic Signature of Registered Agent		Date
Officer/Dire	ctor Detail :		
Officer/Dire	<b>ctor Detail :</b> DST	Title	VP
••		Title Name	VP SMITH, C
Title	DST		
Title Name	DST BERNSTEIN, S PO BOX 3123	Name	SMITH, C 824 GALIANO STREET
Title Name Address	DST BERNSTEIN, S PO BOX 3123	Name Address	SMITH, C 824 GALIANO STREET
Title Name Address City-State-Zip:	DST BERNSTEIN, S PO BOX 3123 CORAL GABLES FL 33114-3123	Name Address	SMITH, C 824 GALIANO STREET
Title Name Address City-State-Zip: Title	DST BERNSTEIN, S PO BOX 3123 CORAL GABLES FL 33114-3123 PRES	Name Address	SMITH, C 824 GALIANO STREET

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: SMITH, C

RA

Electronic Signature of Signing Officer/Director Detail

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

## **Current Principal Place of Business:**

824 GALIANO CORAL GABLES, FL 33134

**DOCUMENT# 726441** 

## FILED Jan 06, 2021 Secretary of State 1379326997CC