I hereby certify that the information indicated on this report or supplemental report is true and a oath: that I am an officer or director of the corporation or the receiver or trustee empowered to e		
above, or on an attachment with all other like empowered.		otatutes, and that my hame appears
SIGNATURE: WILLIAM UMANSKY	CEO	03/01/2016

SIGNATURE: WILLIAM UMANSKY

I

Electronic Signature of Signing Officer/Director Detail

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE:

Officer/Director Detail : DP Title Title D Name UMANSKY, WILLIAM Name WEST, JIM Address 3799 CASSIA DR. Address 1507 S. HIAWASSEE ROAD #101 City-State-Zip: ORLANDO FL 32835 City-State-Zip: ORLANDO FL 32828 Title OFFICER Name PAGE, WINNIE 6679 BOUGANVILLA CRESCENT DR. Address

City-State-Zip: ORLANDO FL 32809

Current Principal Place of Business:

Entity Name: SECOND CHANCE OF FLORIDA FOUNDATION, INC.

1945 E MICHIGAN ST ORLANDO, FL 32806

Current Mailing Address:

DOCUMENT# N10000011325

1945 E MICHIGAN ST ORLANDO, FL 32806

FEI Number: 27-4252273

Name and Address of Current Registered Agent:

Electronic Signature of Registered Agent

UMANSKY, WILLIAM 3799 CASSIA DR ORLANDO, FL 32828 US

FILED Mar 01, 2016 Secretary of State CC9061054177

Date

Certificate of Status Desired: No

Date

CEO