Certificate of Status Desired: Y			
Name and Address of Current Registered Agent:			
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.			
Da			
tle CEO			
ame SWINDLER, JULIE			
ddress 3333 FOREST HILL BLVD. 2ND FLOOR			
ity-State-Zip: WEST PALM BEACH FL 33406			
tle VP			
ame ZAMORA, PEDRO			
ddress2424 N FEDERAL HIGHWAY, STE 103ity-State-Zip:BOCA RATON FL 33431			

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.

Title

Name

Address

City-State-Zip:

CEO

SECRETARY

SHARMA, SUNNY

BOCA RATON FL 33487

5400 BROKEN SOUND BLVD. STE 100

SIGNATURE: JULIE SWINDLER

TREASURER

JEMTRUD, KYLE

301 VALLETTE WAY

WEST PALM BEACH FL 33401

Title

Name

Address

City-State-Zip:

Electronic Signature of Signing Officer/Director Detail

Current Principal Place of Business: 3333 FOREST HILL BLVD - 2ND FLOOR WEST PALM BEACH, FL 33406

Entity Name: FAMILIES FIRST OF PALM BEACH COUNTY FOUNDATION, INC.

FILED Feb 04, 2015 **Secretary of State** CC0424525823

sired: Yes

Date

02/04/2015 Date