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.

PRESIDENT

SIGNATURE: I ISABEL RODRIGUEZ

Electronic Signature of Signing Officer/Director Detail

/ (000		/1441000	
City-State-Zip:	NORTH MIAMI BEACH FL 33162	City-State-Zip:	NORTH MIAMI BEACH FL 33162
Title	D	Title	D
Name	MOJICA, MARIA A	Name	MOJICA, MARIA I
Address	16499 NE 19TH AVENUE SUITE 107N	Address	16499 NE 19TH AVENUE SUITE 107N
City-State-Zip:	NORTH MIAMI BEACH FL 33162	City-State-Zip:	NORTH MIAMI BEACH FL 33162

Address

Address

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: Electronic Signature of Registered Agent **Officer/Director Detail :** Title D Title D RODRIGUEZ, I ISABEL JONES, STANLEY Name Name

FEI Number: 46-5107319

Current Mailing Address:

P.O BOX 600711

DOCUMENT# N1400002521

16499 NE 19TH AVENUE SUITE 107N NORTH MIAMI BEACH. FL 33162

Current Principal Place of Business:

NORTH MIAMI BEACH. FL 33162 US

Name and Address of Current Registered Agent:

16499 NE 19TH AVENUE SUITE 107N

Entity Name: NONPROFITORGANIZATIONGROUP INC.

RODRIGUEZ, I ISABEL 16499 NE 19TH AVENUE SUITE 107N NORTH MIAMI BEACH, FL 33162 US

FILED Mar 30, 2016 Secretary of State CC8861701558

Date

Certificate of Status Desired: Yes

16499 NE 19TH AVENUE SUITE 107N

03/30/2016

Date