

2016 FLORIDA NOT FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N14000009619

FILED
Feb 18, 2016
Secretary of State
CR0945828657

Entity Name: SIGMA PHI EPSILON FLORIDA NU CHAPTER FRATERNAL ASSOCIATION, INC.

Current Principal Place of Business:

3100 BRICKELL AVE
MIAMI, FL 33129

Current Mailing Address:

3100 BRICKELL AVE
MIAMI, FL 33129 US

FEI Number: 47-2159310

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

JELKE, THOMAS BARTHOLOMAY PHD
3100 BRICKELL AVE
MIAMI, FL 33129 US

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: THOMAS B JELKE PHD

02/18/2016

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name ALONSO, DANIEL
Address 3100 BRICKELL AVE
City-State-Zip: MIAMI FL 33129

Title TREASURER
Name SABATES, MATTHEW
Address 3100 BRICKELL AVE
City-State-Zip: MIAMI FL 33129

Title DIRECTOR
Name MARRERO, JONATHAN
Address 3100 BRICKELL AVE
City-State-Zip: MIAMI FL 33129

Title SECRETARY
Name COLON, ALEX
Address 3100 BRICKELL AVE
City-State-Zip: MIAMI FL 33129

Title DIRECTOR
Name SAAVEDRA, MARK
Address 212 PONCE DE LEON BLVD. 11TH FLOOR
City-State-Zip: CORAL GABLES FL 33134

Title VP
Name MOJENA, ALFREDO
Address 3100 BRICKELL AVE
City-State-Zip: MIAMI FL 33129

Title OTHER
Name JELKE, THOMAS BARTHOLOMAY PHD
Address 3100 BRICKELL AVE
City-State-Zip: MIAMI FL 33129

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: THOMAS B JELKE PHD

OTHER

02/18/2016

Electronic Signature of Signing Officer/Director Detail

Date