I hereby certify that the information indicated on this report or supplemental report is true and accurat oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execut		
above, or on an attachment with all other like empowered.		
SIGNATURE: GINA KNOWLES	DIRECTOR	04/07/2024

Electronic Signature of Signing Officer/Director Detail

Entity Name: HEADKNOWLES FOUNDATION INC.

Current Principal Place of Business:

5620 NW 12TH AVE SUITE 103 FORT LAUDERDALE, FL 33309

Current Mailing Address:

16800 SW 87 CT PALMETTO BAY, FL 33157 US

FEI Number: 84-3568024

Name and Address of Current Registered Agent:

KNOWLES, GINA 16800 SW 87TH CT MIAMI, FL 33157 US Certificate of Status Desired: Yes

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	GINA KNOWLES			04/07/2024
	Electronic Signature of Registered Agent			Date
Officer/Director Detail :				
Title	P/D	Title	D/S	
Name	KNOWLES, GINA	Name	LEE D'ARVILLE, KRYSTYNIA	
Address	16800 SW 87 CT	Address	16800 SW 87 CT	
City-State-Zip:	PALMETTO BAY FL 33157	City-State-Zip:	PALMETTO BAY FL 33157	

FILED Apr 07, 2024 **Secretary of State** 6792603982CC

Date