#### 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: SANDRA MOLIERE

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.

# Electronic Signature of Registered Agent

Officer/Director Detail :			
Title	P	Title	VP
Name	MOLIERE, SANDRA	Name	THOMAS, TERENCE
Address	760 NE 168 ST	Address	875 NE 195 ST # 113
City-State-Zip:	N MIAMI BEACH FL 33162	City-State-Zip:	MIAMI FL 33179
	-		
Title	S		
Name	MOLIERE, MELISE		
Address	760 NE 168 ST		
City-State-Zip:	N MIAMI BEACH FL 33162		

## FEI Number: 88-3159974

N MIAMI BEACH. FL 33162 UN

**Current Mailing Address:** 

N MIAMI BEACH, FL 33162

760 NE 168 ST

760 NE 168 ST

SIGNATURE:

### Name and Address of Current Registered Agent:

MOLIERE, SANDRA 760 NE 168 ST N MIAMI BEACH, FL 33162 US

#### 2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT DOCUMENT# N2200009464

Entity Name: A MOLIERE FAMILY FOUNDATION INC

**Current Principal Place of Business:** 

FILED Apr 30, 2023 Secretary of State 0992765124CC

Certificate of Status Desired: No

Date

04/30/2023 Date

MANAGING MEMBER