

**2019 FLORIDA NOT FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# N98000000525

**Entity Name:** TROPICAL RAINFOREST FOUNDATION, INC.

**Current Principal Place of Business:**

C/O 201 S. BISCAYNE BOULEVARD  
SUITE 800  
MIAMI, FL 33131

**Current Mailing Address:**

C/O 201 S. BISCAYNE BOULEVARD  
SUITE 800  
MIAMI, FL 33131 US

**FEI Number:** 65-0829147

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

LAW CENTER OF FLORIDA, INC.  
201 S. BISCAYNE BOULEVARD  
SUITE 800  
MIAMI, FL 33131 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:** JAMES M. MEYER

10/10/2019

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title DIRECTOR  
Name GALLEGOS, JAY D.  
Address C/O 201 S. BISCAYNE BOULEVARD  
SUITE 800  
City-State-Zip: MIAMI FL 33131  
  
Title DIRECTOR  
Name DEL VALLE PEZZAROSSO, SALVADOR  
Address C/O 201 S. BISCAYNE BOULEVARD  
SUITE 800  
City-State-Zip: MIAMI FL 33131

Title DIRECTOR  
Name GONZALEZ-CAMPO HINOJOSA, JOSE  
RENE  
Address C/O 201 S. BISCAYNE BOULEVARD  
SUITE 800  
City-State-Zip: MIAMI FL 33131

*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:** SALVADOR DEL VALLE PEZZAROSSO

**DIRECTOR**

10/10/2019

Electronic Signature of Signing Officer/Director Detail

Date