

701541

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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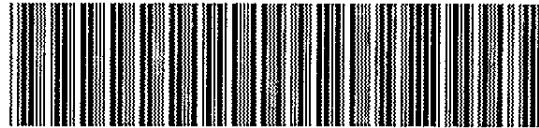
(Business Entity Name)

(Document Number)

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BR 117

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: BROTHERS OF THE GOOD SHEPHERD OF FLORIDA, INC.
(Name of corporation)

DOCUMENT NUMBER: 701541

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

JOSEPH CHARRON
(Name of person)

CAMILLUS HOUSE
(Name of firm/company)

336 NW 5TH STREET
(Address)

MIAMI FL 33128
(City/state and zip code)

For further information concerning this matter, please call:

BROTHER SAVIO CHARRON at (305) 577-4840 EXT 308
(Name of person) (Area code & daytime telephone number)

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
409 E. Gaines Street
Tallahassee, FL 32399

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED
AGENT OR BOTH FOR CORPORATIONS**

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of FLORIDA in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: BROTHERS OF THE GOOD SHEPHERD OF FLORIDA, INC.
2. The principal office address: 336 NW 5TH STREET
MIAMI FL 33128
3. The mailing address (if different): P.O. Box 11829
MIAMI FL 33101
4. Date of incorporation/qualification: 10-14-60 Document number: 701541
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

MICHAEL MIESZALA
336 NW 5TH ST
MIAMI FL 33128

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

JOSEPH CHARRON
336 NW 5TH ST
(P.O. Box or personal mailbox NOT acceptable)
MIAMI FL 33128

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

M. Raphael Mieszala
(Signature of an officer, chairman or vice chairman of the board)

M. RAPHAEL MIESZALA, PRESIDENT
(Printed or typed name and title)

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

Joseph Charron
(Signature of Registered Agent)

12/14/2002
(Date)

If signing on behalf of an entity:

(Typed or Printed Name)

(Capacity)

*** FILING FEE: \$35.00 ***

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE AND MAIL TO:
DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

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