702242

(Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
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COVER LETTER

TO:	Amendment Section Division of Corporations			
SUBJE	CT: University of Miami (Name of Corporation)	on)		
	Ç	•		
DOCU	MENT NUMBER: 702242			
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:				
	,			
Andrea E. Orange				
(Name of Contact Person)				
University of Miami				
(Firm/Company)				
1507 Levante Avenue, 333 Max Orovitz Building (Address)				
(Addiess)				
0 10 11 0140				
Coral Gables, FL 33146 (City/State and Zip Code)				
For further information concerning this matter, please call:				
	Andrea E. Orange at (305) 284-3163		
	(Name of Contact Person)	305) 284-3163 Area Code & Daytime Telephone Number)		
Enclosed is a \$35.00 check made payable to the Department of State.				
	Mailing Address: Amendment Section	Street Address: Amendment Section		
	Amendment Section Division of Corporations	Amendment Section Division of Corporations		
	P.O. Box 6327	Clifton Building		
	Tallahassee, FL 32314	2661 Executive Center Circle		
		Tallahassee, FL 32301		

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: University of Miami	
2. The principal office address: 1252 Memorial Drive, Ashe Building, Coral Gables, FL 33146	
	_
3. The mailing address (if different):	_
4. Date of incorporation/qualification: <u>04/07/1961</u> Document number: <u>702242</u>	
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned) Alan J. Fish (resigned) 1507 Levante Avenue, 327 Max Orovitz Bullding	
Alan J. Fish (resigned)	
Coral Gables, FL 33146	
Coral Gables, FL 33146 6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):)
Andrea E. Orange	
1507 Levante Avenue, 333 Max Orovitz Building (P.O. Box NOT acceptable)	
Coral Gables, FL 33146	
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.	
Aileen M. Ugalde, Vice President, General Counsel & Secretary (Printed or Typed name and tille)	
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 marely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.	
(Signature of Registered Agent) If signing on behalf of an entity:	
Andrea Orange (Typed or Printed Name)	
* * * FILING FEE: \$35,00 * * *	

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (8/05)