

702242

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

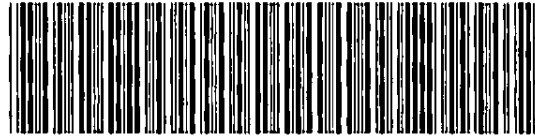
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



900319204669

10/08/16--01001--027 **35.00

FILED

2018 OCT - 8 PM 12:52

CLERK OF STATE
TALLAHASSEE, FL

C. GOLDEN

OCT 16 2018

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: University of Miami
Name of Corporation

DOCUMENT 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:

Humberto Speziani

Name of Contact Person

University of Miami Risk Management

Firm/Company

1320 South Dixie Hwy S-1200

Address

Coral Gables, Florida 33146

City/State and Zip Code

hmspez@miami.edu

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Pilar Schuitema

Name of Contact Person

at (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
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Amendment Section
Division of Corporations
Clifton Building
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: 1320 South Dixie Hwy S-1200 Coral Gables, Florida 33146
3. The mailing address (if different): same
4. Date of incorporation/qualification: 04/07/1961 Document number: 702242
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)

Andrea Orange, resigned

1320 South Dixie Hwy S-1200

Coral Gables, Florida 33146

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

Humberto Speziani

UM Risk Management 1320 South Dixie Hwy S-1200

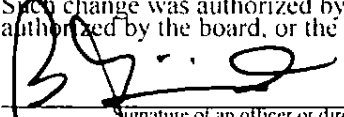
P.O. Box NOT acceptable

Coral Gables, Florida 33146

FILED
2018 OCT - 8 PM 12:52
SECRETARY OF STATE
TALLAHASSEE, FL

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.

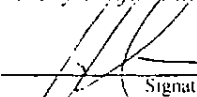


Signature of an officer or director

Brandon Gilliland

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.



Signature of Registered Agent

10/1/2018

Date

If signing on behalf of an entity:

Humberto Speziani

Typed or Printed Name

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