

# 2014 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# 709786

**FILED**  
**Oct 31, 2014**  
**Secretary of State**

**Entity Name:** MIAMI DADE COLLEGE FOUNDATION, INC

**Current Principal Place of Business:**

300 NE 2 AVE  
RM 1423-1  
MIAMI, FL 33132

**New Principal Place of Business:**

**Current Mailing Address:**

300 NE 2 AVE  
RM 1429  
MIAMI, FL 33132

**New Mailing Address:**

**FEI Number:** 59-6169745      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**

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

ROJAS, ANNABELLE C MBA  
300 NE 2 AVENUE  
RM 1429  
MIAMI, FL 33132 US

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

ZURIARRAIN, AMAURY  
300 NE 2 AVE STE 1429  
MIAMI  
FL, FL 33132 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: AMAURY ZURIARRAIN      10/31/2014  
Electronic Signature of Registered Agent      Date

**OFFICERS AND DIRECTORS:**

Title: COBD  
Name: GRIMES, JULIE  
Address: 1717 N. BAYSHORE DRIVE, STE 102  
City-St-Zip: MIAMI, FL 33132

Title: V  
Name: PLASENCIA, JORGE A  
Address: 2153 CORAL WAY STE 500  
City-St-Zip: MIAMI, FL 331345

Title: ED  
Name: ZURIARRAIN, AMAURY  
Address: 300 N.E. 2ND AVENUE, RM 1429  
City-St-Zip: MIAMI, FL 33132

Title: T  
Name: GIL, AUGUSTO  
Address: 7300 SW 93RD AVE, STE 210  
City-St-Zip: MIAMI, FL 33173

Title: S  
Name: LOUISSAINT, BEATRICE  
Address: 9499 NE 2ND AVE, STE 201  
City-St-Zip: MIAMI, FL 33138

Title: D  
Name: JOHNSTON, MARIA  
Address: 150 W FLAGLE ST STE 1901  
City-St-Zip: MIAMI, FL 33130

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: AMAURY ZURIARRAIN      ED      10/31/2014  
Electronic Signature of Signing Officer or Director      Date