753076

(Re	equestor's Name)	
(Ad	Idress)	. <u> </u>
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DIVISION OF CORPORATIONS
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COVER LETTER

TO: Amendment Section Division of Corporations		
SUBJECT: Morida Governor's Mansion Foundation, Inc.		
DOCUMENT NUMBER: 753076		
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:		
Heather L. Stearns Name of Contact Person		
Firm/Company		
400 South Monroe Street, Rm. 209		
Tauahassee FL 32399 City/State and Zip Code		
heather. Stearns @ evg. myflonida. Com E-mail address: (to be used for future angual report notification)		
For further information concerning this matter, please call:		
Heather Steams at (850) 717 - 9310 Name of Contact 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** Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

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

j.
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: Florida Governor's Mansion Foundation, Inc.
2. The principal office address: Foo North Adams Street Tallahassee,
FL 32303
3. The mailing address (if different):
4. Date of incorporation/qualification: $\frac{6/23/80}{}$ Document number: $\frac{753076}{}$
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)
Carly Hermanson (Resigned) =
The Capital Rm. 209
Talluhassee, FL 32399
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Heather L. Stearns
400 South Monroe Street, Rm. 209 P.O. Box NOT acceptable
Tallahassee, Fr. 32399
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 Abby F. Duorce Tras. 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 10/30/12
If signing on behalf of an entity:
Heather Stearns Typed or Printed Name

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