817086

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T. LEWIS

COVER LETTER

Amendment Section Division of Corporations

TO:

Executive Women International - Corporation
Name of Corporation SUBJECT:_ DOCUMENT NUMBER: 817086 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: Name of Contact Person Firm/Company Address City/State and Zip Code E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Area Code & Daytime Telephone Number Name of Contact Person Enclosed is a \$35.00 check made payable to the Department of State. Mailing Address: Amendment Section Street Address: Amendment Section Division of Corporations 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

statement of cha	ange is submitted for a corporation org	9502 , 607 . 1508 , or 617 . 1508 , Florida S ganized under the laws of the State of $\frac{C}{2}$ ristered agent, or both, in the State of F	California
1. The name of	the corporation: Executive Women	International - Corporation	
	office address:	US	
3. The mailing a	address (if different):		
4. Date of incorp	poration/qualification: 04/24/1962	Document number: 817086	
	d street address of the current registere rtment of State: (If resigned, enter resi	d agent and registered office on file wi gned)	th the
	LARSEN, DIANA		
	2651 Tuscarora Trail		
	Maitland, FL 32751		Cine um
6. The name and (if changed):	d street address of the new registered a	gent (if changed) and /or registered off	SECKETARY TALLAHASSI
	InCorp Services, Inc.		15 ARY SSE
	17888 67th Court North		SEE. FLORES
	P.O. Box N Loxahatchee, FL 33470	IOT acceptable	
Such change wa	ess of its registered office and the stre be identical.	ted by its board of directors or by an o	
	Man Chem-	Darlene Banoga	n Serul
Signatu	re of an officer or director	Printed or typed name and title	
I hereby accept I further agree i performance of agent. Or, if the hereby donjirm	the appointment as registered agent to comply with the provisions of all st my duties, and I am familiar with and is document is being filed merely to re that the corporation has been notified	and agree to act in this capacity. latutes relative to the proper and com d accept the obligation of my position effect a change in the registered office d in writing of this change.	plete as registered e address, I
1 Bi	HADOREN	August 8, 2012	
	half of an entity:	Date	
	ensen on behalf of Incorp Serv	vices, Inc.	

Make checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 CR2E045 (03/12)

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