

849941

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

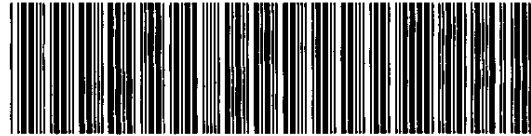
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



700183440707

08/05/10--01005--021 **35.00

APPROVED
AND
FILED

10 AUG -5 PM 12:45
SECRETARY OF STATE
TALLAHASSEE, FL 32310

APR
8/10/10
TR

**NCR NATIONAL
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July 30, 2010

Florida Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

RE: Tourette Syndrome Association, Inc.

Dear Sir/Madam:

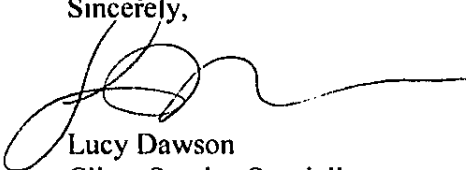
For your information, the above company is qualified to do business in your state and we now enclose the necessary documents required to affect Change of Agent to **National Corporate Research, Ltd.**

In connection with this matter, we ask that you please have it filed in your office upon receipt and return the evidence to this office by means of the self-addressed envelope which we have enclosed for your convenience.

We also enclose our check made payable to your state in payment of filing fees.

Should you have any questions in regard to the above, please do not hesitate to give me a telephone call.

Sincerely,



Lucy Dawson
Client Service Specialist

ENCLOSURE
REGULAR MAIL

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 New York in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation:

TOURETTE SYNDROME ASSOCIATION, INC.

2. The principal office address:

42-40 Bell Blvd., Suite 205 Bayside NY 11361

3. The mailing address (if different):

4. Date of incorporation/qualification: 8/6/1981 Document number: 849941

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

ELEANOR CURRY

138 W. LEON LANE

COCOA BEACH FL 32931

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

National Corporate Research, Ltd., Inc.

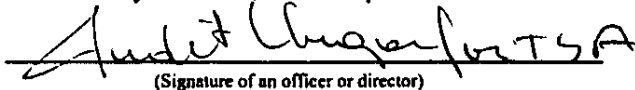
515 East Park Avenue

(P.O. Box NOT acceptable)

Tallahassee Florida 32301

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

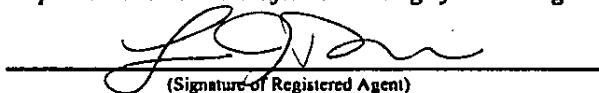
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.


(Signature of an officer or director)

Judit Ungar President

(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)

7/29/2010
(Date)

If signing on behalf of an entity:

Lucy Dawson, Assistant Secretary

(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

APPROVED AND FILED
10 AUG -5 PM 12:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA