Foldows 33

(Re	equestor's Name)	
(Ad	ldress)	<u> </u>
(Ad	ldress)	
(Cit	ty/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nar	me)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



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08/06/15--01020--006 **35.00

TALLANIASSEE PROBLE

RIACHS

AUG 07 2015

R. WHITE



CSC - WILMINGTON
Suite 400
2711 Centerville Road
Wilmington De 19808
800-927-9800
302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Janis M. Smith janis.smith@cscglobal.com

Date: August 4, 2015

Order#: 732421-039

Re: LUPUS FOUNDATION OF AMERICA, INC.

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$35.

Please take the following action:

XX File in your office on a routine basis.

XX Issue Proof of Filing.

XX Please return evidence to the following:

Attn: Janis M. Smith

c/o Corporation Service Company
2711 Centerville Road, Suite 400

Wilmington, DE 19808

XX Return envelope is also enclosed for your convenience.

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

QUCA.XCOA

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

statement of cha	provisions of sections 607.0302, 617.0302 inge is submitted for a corporation organi r to change its registered office or registe.	zed under the la	ws of the State of <u>D</u>	istrict of Columbia	
1. The name of t	he corporation: LUPUS FOUNDATION C	F AMERICA, IN	IC.		
2. The principal Washington,	office address: 2000 L St NW Ste 410 DC 20036				
	ddress (if different):				
4. Date of incorp	poration/qualification: 07/01/2002	Document	number: F0200000	03373	
	I street address of the current registered ag tment of State: (If resigned, enter resigned		ed office on file wit	h the	
	NRAI Services, Inc			된는 5	
	1200 South Pine Island Road			AUS -	
	Plantation	FL	33324	Sec. 2	
6. The name and (if changed):	street address of the new registered agen	t (if changed) an	d /or registered offi	SEE, FLORIDA	
	1201 Hays Street				
	P.O. Box NOT acceptable				
	Tallahassee	FL	32301		
The street addre	ess of its registered office and the street a be identical.	ddress of the bu	siness office of its	registered agent,	
Such change wa authorized by th	s authorized by resolution duly adopted e board, or the corporation has been not	by its board of of the distriction of the districti	lirectors or by an o of the change.	fficer so	
\mathcal{I}		Dona Priebe		Vice President	
I further agree to performance of agent. Or, if this hereby confirm	the appointment as registered agent and o comply with the provisions of all statum my duties, and I am familiar with and ac s document is being filed merely to reflet that the corporation has been notified in Service Company	agree to act in tes relative to th	e proper and comp ion of my position i	olete as registered	
By: Drag	Hat hi	07/30/2015			
	nature of Registered Agent		Date	20/23/20	
If signing on bel	half of an entity:				
Grace E. Kirby,	Assistant Vice President				
Ty	ped or Printed Name				

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