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| (Re | questor's Name) | | | |
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| (Ad | dress) | | | |
| (Ad | ldress) | | | |
| (Cit | ry/State/Zip/Phone | <i></i> | | |
| PICK-UP | ☐ WAIT | MAIL | | |
| (Bu | isiness Entity Nan | ne) | | |
| (Document Number) | | | | |
| Certified Copies | Certificates | of Status | | |
| Special Instructions to Filing Officer: | | | | |
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Mrsh. D



CSC - WILMINGTON
251 Little Falls Drive
Wilmington De 19808

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Lindsey Baronie lindsey.baronie@cscglobal.com

Date: February 24, 2021

Order#: 678753-005

Re: GOODSPEED OPERA HOUSE FOUNDATION, INC.

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$35.00.

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: Lindsey Baronie c/o Corporation Service Company 251 Little Falls Drive 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 | inge is submitted for a corport | 12, 017.0302, 007.1308, or 017.1308, Florida Su ation organized under the laws of the State of <u>C</u> se or registered agent, or both, in the State of Flo | onnecticut |
|---|---|--|-------------------|
| | | • | ,, iuu. |
| | office address: 6 Main Street | D OPERA HOUSE FOUNDATION, INC. , East Haddam, CT 06423 | |
| 3 The mailing a | ddress (if different): 6 Main S | Street, P.O. Box A, East Haddam, CT 06423 | |
| | | ber 12, 2002 Document number: F020000 | |
| 5. The name and | street address of the current i | registered agent and registered office on file with | |
| Florida Depai | tment of State: (If resigned, er | nter resigned) | |
| | CF Registered Agent, Inc. | | |
| | _100_S_Ashley Drive, Suite 4 | 400 | |
| | Tampa | FL 33602 | |
| 6. The name and (if changed): | l street address of the new reg | istered agent (if changed) and /or registered offic | e e |
| | Corporation Service Compa | any | 26 |
| | 1201 Hays Street | | 2021 FE3 |
| | | P.O. Box NOT acceptable | <u> </u> |
| | Tallahassee | FL 32301 | 25 |
| The street address changed will | ess of its registered office and be identical. | the street address of the business office of its | registered agent, |
| Such change wa authorized by th | as authorized by resolution du ne board, or the corporation h | aly adopted by its board of directors or by an or as been notified in writing of the change. | fficer so |
| Lile | for | Hila Rosen | President |
| I hereby accept I further agree to of my duties, an document is bei corporation has | the appointment as registere to comply with the provisions of I am familiar with and according filed merely to reflect a charten point of the Service Company | Printed or typed name and title d agent and agree to act in this capacity, of all statutes relative to the proper and comp ept the obligation of my position as registered of iange in the registered office address, I hereby its change. | |
| By: Jundsey | | | |
| Lindsey M. Baron | half of an entity: | Date | |
| T | yped or Printed Name | | |

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