F03000003556

(Requestor's Name)				
(Address)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
•				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
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SECRETARY OF STATE
TALLAHASSEE FLORIDA



COVER LETTER

	ent Section of Corporations	
SUBJECT: KID	S HOPE UNITED, INC (Name of Co	rporation)
DOCUMENT N	UMBER: F03000003556	
The enclosed State	ement of Change of Registered Office/	Agent and fee are submitted for filing.
Please return all c	orrespondence concerning this matter t	o the following:
	KRISTOPHER KOESTER (Name of Cont	act Person)
	KIDS HOPE UNITED, INC (Firm/Con	npany)
<u>:</u>	10720 CARIBBEAN BLVD, SUIT (Addre	
į	MIAMI FL 33189 (City/State and	Zip Code)
For further inform	nation concerning this matter, please ca	11:
KRISTOPHER KO	OESTER arne of Contact Person)	at (786) 712-0513 (Area Code & Daytime Telephone Number)
Enclosed is a \$35.	00 check made payable to the Departm	ent 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

statement of che	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida 1 ange is submitted for a corporation organized under the laws of the State of _	<u> </u>
in orde	er to change its registered office or registered agent, or both, in the State of F	lorida.
1. The name of	the corporation: KIDS HOPE UNITED, INC	
2. The principal	office address: 513 CENTRAL AVENUE, 5TH FL, HIGHLAND PARK, IL 60	035

3. The mailing a	address (if different): 111 E WACKER DR, SUITE 325, CHICAGO IL 6060)6
4. Date of incorp	poration/qualification: 7/14/2003 Document number: F030000)03556
	d street address of the current registered agent and registered office on file wir rtment of State:	th the
	WADE BOYETTE	
	1380 GRAND HIGHWAY, STE 200	_
	CLERMONT FL 34711	 ,
6. The name and (if changed):	d street address of the new registered agent (if changed) and /or registered off	O6 OCT
	GEORGE MEROS C/O GRAY ROBINSON	TARY
	301 SOUTH BRONOUGH STREET	EE 7 D
	(P.O. Box NOT acceptable)	LORAL STA
	TALLAHASSEE FL 32301	58 58 58
The street addre as changed will	ess of its registered office and the street address of the business office of its be identical.	s registered agent,
Such change wa authorized by th	as authorized by resolution duly adopted by its board of directors or by an ne board, or the corporation has been notified in writing of the change.	officer so
Vllu	MARTIN SINNOTT, CEO (Printed or typed name and t	
hereby accept I further agree to of my duties, and document is bein corporation has	the appointment as registered agent and agree to act in this capacity. The comply with the provisions of all statutes relative to the proper and come of all and familiar with and accept the obligation of my position as registered in giled merely to reflect a change in the registered office address, I hereby been notified in writing of this change. The pattern of Registered Agent (Pattern) The pattern of Registered Agent (Pattern)	,
	voed or Printed Name)	

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