

To: The Florida Dept. of State
Subject: 001448.87216

From: Ashley Smith

Thursday, May 22, 2008 4:22 PM Page 1 of 2

F04000000436

Florida Department of State
Division of Corporations
Public Access System

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To:
Division of Corporations
Fax Number : (850) 617-6380

From:
Account Name : CORPDIRECT AGENTS, INC.
Account Number : 110450000714
Phone : (850) 222-1173
Fax Number : (850) 224-1640

FILED
2008 MAY 22 AM 10:32
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

001448.87216

RECEIVED
2008 MAY 22 AM 8:00
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TALLAHASSEE, FLORIDA

REGISTERED AGENT CHANGE
THE FSL SCHOLARSHIP FOUNDATION, INC.

Certificate of Status	0
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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 Virginia
in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: The FSL Scholarship Foundation, Inc.
2. The principal office address: 330 Seventh Avenue, 2nd Floor, NY, NY 10001
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 01/23/2004 Document number: F04000000436
5. The name and street address of the current registered agent and registered office on file with the
Florida Department of State:

Corporation Service Company

1201 Hays Street

Tallahassee, FL 32301

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

NRAI Services, Inc.

2731 Executive Park Drive, Suite 4

(P.O. Box NOT acceptable)

Weston, FL 33331

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]
(Signature of an officer or director)

Suzanne Walford Director
(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]
(Signature of Registered Agent)

05/22/08
(Date)

If signing on behalf of an entity:

SABRINA TILAGUCH, ASST. SEC.
(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
CR2E045 (8-03)

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