## Florida Department of State

Division of Corporations **Electronic Filing Cover Sheet** 

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H10000237771 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6380

From:

: NRAI CORPORATE SERVICES, INC Account Name

Account Number : I20080000054

(949)955-9585

Fax Number

: (800)562-6504

\*\*Enter the email address for this business entity to be used for annual report mailings. Enter only one email address please

Email Address:

## REGISTERED AGENT CHANGE COVENANT HOUSE INCORPORATED

Certificate of Status	0
Certified Copy	0
Page Count	のよろ
Estimated Charge	\$35.00

Electronic Filing Menu

Corporate Filing Menu

Help

TO:

TO:850 617 6381

P.2/3

## **COVER LETTER**

TO: Amendment So Division of Co	ection rporations			
SUBJECT:	Covenant House	Incorpo Corporation	rated	·
	Name of C	Orporation		
DOCUMENT NUMB	ER: F04	0000042	212	···
The enclosed Statemen	t of Change of Registered Offic	e/Agent an	d fee are submit	ted for filing.
Please return all corres	pondence concerning this matte	r to the foll	owing:	
	Nicole	Parnell		·
	Name of Co	ntact Perso	ם	
	NRAI Corporat	e Service	s. Inc.	
-	Firm/C	ompany		
	2875 Michelle t	Drive, Sui	te 100	
		• • • •		
	Irvine, C	A 92606		•
	City/State a	nd Zip Cod	e	
				<del></del>
E-1	nail address: (to be used for t	future anni	ual report notif	ication)
		11-		
For further information	concerning this matter, please	call:		
	cole Parnell	at (	949	955-9585 me Telephone Number
Name o	f Contact Person	Are	a Code & Daytii	me Telephone Number
Enclosed is a \$35.00 cl	heck made payable to the Depar	tment of St	rate.	
	Mailing Address:		Street Address:	
	Mailing Address: Amendment Section	,	Amendment Se	ection
	Division of Corporations		Division of Co	
	P.O. Box 6327 Tallahassee, FL 32314		Clifton Buildir	
	ve Center Circle			

Tallahassee, FL 32301

ุ NOV (01-2010 08:38 FROM:

		FOR CORPOR	AITONS .			
statement of cha	inge is submitted for a co	rporation organize	607.1508, or 617.1508, Flo ed under the laws of the Sta d agent, or both, in the Stat	te of New You		
1. The name of	the corporation: COVO	nant House Ir	ncorporated			
2. The principal	office address: 5 Penr	Plaza 3rd Floo	r, New York, NY 1000	)1		
3. The mailing a	address (if different):					
4. Date of incor	poration/qualification:	7/22/2004	Document number:	F040000	04212	
	i street address of the cur timent of State: (If resign		nt and registered office on f	file with the		
	CT Corporation Sy	stem		=	20 TO SECRI	
	1200 South Pine Island Road					
	Plantation, FL 333	24			PET ST	
6. The name and (if changed):	d street address of the ne	w registered agent (	if changed) and /or register	ed office	SEE.T	

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH

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

P.O. Box NOT acceptable

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.

Hand McCarthy, Treasurer/CFO
Signature of the efficient of director and triple

Daniel McCarthy, Treasurer/CFO
Printed or typed name and triple

I hereby accept the appointment as resistered 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.

Misse Chaireach 10/29/10 Date

If signing on behalf of an entity:

Nicole Chouinard, Assistant Secretary
Typed or Printed Name

NRAI Services, Inc.

Weston, FL 33331

2731 Executive Park Drive, Sulte 4

\* \* \* 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 (8/05)