## F04000006764

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



700226243507

Oparge SA

12 APR 23 PM 1:1

RECEIVED 1

SECRETARY OF STATE

4/23/12



CORPORATION SERVICE COMPANY.

ACCOUNT	NO.	:	120000000195

REFERENCE

L7**5/828. /** 7727185

AUTHORIZATION

COST LIMIT : \$ 35.00

ORDER DATE: April 20, 2012

ORDER TIME : 1:01 PM

ORDER NO. : 175823-005

CUSTOMER NO: 7727185

## CHANGE OF AGENT

NAME:

PUBLIC HEALTH FOUNDATION

ENTERPRISES, INC.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
XX PLAIN STAMPED COPY

CONTACT PERSON: Becky Peirce

EXAMINER'S INITIALS:

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

statement of chang	ge is submitted for a corporation organiz	607.1508, or 617.1508, Florida Statutes, this red under the laws of the State of California red agent, or both, in the State of Florida.	_			
The name of the     The principal of	The name of the corporation: PUBLIC HEALTH FOUNDATION ENTERPRISES, INC.  The principal office address: 12801 Crossroads Parkway South, Suite 200, City of Industry, CA 91746					
3. The mailing add	dress (if different):					
4. Date of incorpo	oration/qualification: 12/01/2004	Document number: F04000006764				
5. The name and s Florida Departr	street address of the current registered age nent of State:	ent and registered office on file with the	м			
]	Business Filings Incorporated					
- -	515 E. Park Avenuc	MILAPR 23 F SECRETARY SECRETARY SECRETARY	7			
	Γallahassee, FL 32301	TANK 23	m			
6. The name and s (if changed):	street address of the new registered agent	mer =	Ö			
(	Corporation Service Company	<u> </u>	•			
_1	1201 Hays Street					
	(P.O. Box NOT acceptable)					
_	Fallahassee, FL 32301					
The street address as changed will b	s of its registered office and the street are identical.	ddress of the business office of its registered age	nt,			
Such change was authorized by the	authorized by resolution duly adopted board, or the corporation has been not	by its board of directors or by an officer so field in writing of the change.				
Mu (Signature	of an officer or director)	Maureen Cathell, Vice President (Printed or typed name and title)	_			
I further agree to of my duties, and document is bein corporation has t	I am familiar with and accept the oblig g filed merely to reflect a change in the been notified in writing of this change.	agree to act in this capacity. tes relative to the proper and complete performa tation of my position as registered agent. Or, if t registered office address, I hereby confirm that t	nce his he			
By:	n Service Company	April 20, 2012	_			
(Signal (Signal )	ature of Registered Agent)  alf of an entity:	(Date)				
	, Assistant Vice President					
	ped or Printed Name)					

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