

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





500276427715

500276427715 09/02/15--01021--016 ***?5.00

15 SEP -2 PH to 09

ALLAHASSEE FLORINA

TALLAHASSEE ET GER

SEP 08 2015

R. WHILE



CSC - WILMINGTON
Suite 400
2711 Centerville Road
Wilmington De 19808
800-927-9800
302-636-5454 FAX

TO: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Ami Casper ami.casper@cscglobal.com

Date: August 31, 2015

Order#: 732922-025

Re: THE PROSKAUER ROSE CHARITABLE FOUNDATION

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$35 .

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: Ami Casper

c/o Corporation Service Company
2711 Centerville Road, Suite 400

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	provisions of sections 607.0502, (mge is submitted for a corporatio r to change its registered office o	n organized under the lo	aws of the State of	New York
1. The name of t	the corporation: THE PROSKAU	ER ROSE CHARITABL	E FOUNDATION	INC.
2. The principal	44 700 00	e, Room 2318, New Yor		
3. The mailing a	ddress (if different):			
4. Date of incorp	poration/qualification: 09/16/200	5 Document	number: F05000	0005387
	I street address of the current regi		red office on file v	vith the
	David P. Pratt, c/o Proskauer R	ose LLP		_
	2255 Glades Road, Suite 421 A	trium		-
	Boca Raton	FL	33431	골:
6. The name and (if changed):	I street address of the new register	red agent (if changed) ar	nd /or registered o	SEP 2
	Corporation Service Company			
	1201 Hays Street			
P.O. Box NOT acceptable Tallahassee FL 32301				
The street addre	ess of its registered office and the be identical.			ts registered agent,
Such change wa authorized by th	as authorized by resolution duly a ne board, or the corporation has b	ndopted by its board of open notified in writing of	directors or by an of the change.	officer so
Signatur	Collicer of director	JAUL JUL	od or typed name and ti	retary
I further agree t performance of agent. Or, if thi hereby confirm	The appointment as registered as comply with the provisions of a my duties, and I am familiar with a document is being filed merely that the corporation has been no nervice Company	all statutes relative to the	ie proper and con tion of my positio	nplete n ás registered ce address, I
Ву: /	august	08/31/20		***
, 0	nature of Registered Alecat		Date	
-	, Asst. Vice President			
	ped or Printed Name			

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