F05000006557

(Re	equestor's Name)			
(Ad	dress)			
(Ad	ldress)	· · · · · · · · · · · · · · · · · · ·		
(Cit	ty/State/Zip/Phone	e #)		
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	Certificates	s of Status		
Special Instructions to Filing Officer:				
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Office Use Only



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15 MAY 15 AM II: 52

MAY 2 1 2015 T CANNON



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

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Ellen Rosaio ellen.rosaio@cscglobal.com

Date: May 13, 2015

Order#: 603705-020

Re: AUBURN UNIVERSITY 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: Ellen Rosaio

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.

OUCA.XCOA

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

statement of ch	ange is submitted for a corpor	02, 617.0502, 607.1508, or 617.1508, Florida Statutes ation organized under the laws of the State of <mark>Alabam</mark> ce or registered agent, or both, in the State of Florida.	na	_		
1. The name of	the corporation: AUBURN UN	IIVERSITY FOUNDATION, INC.				
2. The principal office address: 317 SOUTH COLLEGE STREET, AUBURN, AL 36849						
3. The mailing a	address (if different):					
4. Date of incorporation/qualification: 11/10/2005 Document number: F05000006557						
	d street address of the current rtment of State: (If resigned, e	registered agent and registered office on file with the inter resigned)				
	NRAI SERVICES, INC					
	1200 South Pine Island Roa	od_				
	Plantation	FL 33324	15	SE		
6. The name and (if changed):	d street address of the new reg	gistered agent (if changed) and /or registered office	MAY 15	FIL CRETARN LAHASS		
	Corporation Service Compa	ny	A			
	1201 Hays Street		AH II: 5:	STAT		
	Tallahassee	P.O. Box NOT acceptable FL 32301	ω	DA 3		
-		If the street address of the business office of its register only adopted by its board of directors or by an officer state been notified in writing of the change.		ent,		
		Dona Priebe, Vice President				
Signatu	Signature of an officer or director Printed or typed name and title					
performance of agent. Or, if th hereby confirm	the appointment as registere to comply with the provisions my duties, and I am familiar is document is being filed me that the corporation has been Service Company	d agent and agree to act in this capacity. s of all statutes relative to the proper and complete with and accept the obligation of my position as reg rely to reflect a change in the registered office addre n notified in writing of this change.	istered ess, I			
By: Mac	<u> </u>	05/13/2015		-		
, and a	nature of Registered Agent chalf of an entity:	Date				
	Assistant Vice President					
	yped or Printed Name					

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