

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 : CHARLES BACLET AND ASSOCIATES INC

Account Number: 120080000054
Phone: (949)955-9585

Fax Number : (800)562-6504

REGISTERED AGENT CHANGE

RHF FOUNDATION, INC.

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$35.00

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7/1/2009

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

statement of change is submitted for a	607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this corporation organized under the laws of the State of California red office or registered agent, or both, in the State of Florida.
1. The name of the corporation:	RHF FOUNDATION, INC.
2. The principal office address: 911 N	ORTH STUDEBAKER ROAD
LONG BEACH, CA 90816-	
3. The mailing address (if different):_	911 NORTH STUDEBAKER ROAD
LONG BEACH, CA 90815-51	
4. Date of incorporation/qualification:	AUGUST 7, 2008 Document number: F08000003464
5. The name and street address of the Florida Department of State:	current registered agent and registered office on file with the
CT Corporation	on System
1200 South P	ine Island Road 출위 등
Plantation, FL	33324
(if changed):	new registered agent (if changed) and /or registered office s, Inc. ve Park Drive, Suite 4
NRAI Services	s, inc.
	ve Park Orive, Suite 4
Weston, FL	(a total sade a samplement)
	office and the street address of the business office of its registered agent oblution duly adopted by its board of directors or by an officer so oration has been notified in writing of the change.
doeberela A	Deborah J. Stouff, Secretary
(Signature of the officer of director)	(Printed of typed Harrie lind noe)
I hereby accept the appointment as I further agree to comply with the p of my duties, and I am familiar with document is being filed merely to re corporation has been notified in wr	registered agent and agree to act in this capacity. rovisions of all statutes relative to the proper and complete performance and accept the obligation of my position as registered agent. Or, if thi effect a change in the registered office address, I hereby confirm that the ting of this change.
Jose-Caetellanos Assistant Sucret	(Data)
If signing on behalf of an entity:	
National Registered Age (Typed or Printed Name)	nts, Inc.
	* * * PH INC PPR: \$35 00 * * *

* * * 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)

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