## 000000383

(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:	$\neg$				
J. HOI AUG Z 3					
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Office Use Only



800433199148

2024 NUS 22 AM 10: 07

, CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195						
REFERENCE : 589965 8457762						
AUTHORIZATION :						
AUTHORIZATION :  COST LIMIT : \$ 35.00						
ORDER DATE : August 9, 2024						
ORDER TIME : 9:32 AM						
ORDER NO. : 589965-062						
CUSTOMER NO: 8457762						
CHANGE OF AGENT						
NAME: THE BANYAN FOUNDATION, INC.						
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:						
CERTIFIED COPY  XX PLAIN STAMPED COPY						
CONTACT PERSON: Amanda Miller						
EXAMINER'S INITIALS:						

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

statement of cha	provisions of sections 607.0302, 617.03 inge is submitted for a corporation orga r to change its registered office or regis	mized under the laws o	f the State of	NC		
1. The name of t	he corporation: THE BANYAN FOUND	DATION, INC.				
2. The principal						
3. The mailing a	ddress (if different):	-	_			
4. Date of incorp	poration/qualification: 08/25/2010	Document num	ber:F10000	0003824		
	I street address of the current registered tment of State: (If resigned, enter resign		ffice on file w	ith the		
	CT Corporation System			_		
	1200 South Pine Island Road			_		
	Plantation	FL 3	3324	_		
6. The name and (if changed):	street address of the new registered ag	ent (if changed) and /o	r registered of	 itice		
	Corporation Service Company			23		
	1201 Hays Street					
	P.O. B.	ox NOT acceptable  FL 3:	2301	2024 AUG 22		
The street addre as changed will	ess of its registered office and the stree be identical.	t address of the busine	ess office of i			
Such change wa authorized by th	is authorized by resolution duly adopte the board, or the corporation has been n	ed by its board of directified in writing of the	ctors or by an ne change.	officer so:		
/S/ Caleigh Mill	ler	Caleigh Miller	co	o .		
Signatur	e of an officer or director	Printed or	typed name and t	itle		
of my duties, and document is being corporation has	the appointment as registered agent a comply with the provisions of all stad I am familiar with and accept the obing filed merely to reflect a change in the been notified in writing of this change in Service Company	ligation of my position he registered office ac	capacity. oper and cor n as registere ldress, I here	nplete performance ed agent. Or, if this by confirm that the		
By: Wrace	2-Kuby nature of Registered Agent	08/20/2024	08/20/2024			
Į.	half of an entity:					
Grace E. Kirby, <i>i</i>	Asst Vice President					
Ty	ped or Printed Name					
	* * * FILING F	EE: \$35.00 * * *				

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314