F16 0000000088

(Re	equestor's Name)			
(Address)				
(Address)				
(Cit	y/State/Zip/Phon	e #)		
PICK-UP	☐ WAIT	MAIL		
(Bu	siness Entity Nar	me)		
(Do	cument Number)			
Certified Copies	Certificates of Status			
Special Instructions to Filing Officer:				

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RIANA



CSC - WILMINGTON
251 Little Falls Drive
Wilmington De 19808

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Carissa Koetitz carissa.koetitz@cscglobal.com

Date: October 7, 2019

Order#: 945594-015

Re: SOCCER STARS FOUNDATION

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$35.00.

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: Carissa Koetitz c/o Corporation Service Company 251 Little Falls Drive 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	unge is submitted for a corp	0502, 617.0502, 607.1508, or c poration organized under the la office or registered agent, or ba	iws of the State of DE	LAWARE		
1. The name of	the corporation; SOCCER	STARS FOUNDATION, INC.				
2. The principal	office address: 606 CO	LUMBUS AVE, NEW YO	ORK, NY 10024			
3. The mailing a						
4. Date of incor	poration/qualification: 01/	/06/2016 Document	number: _F1600000	0088		
	d street address of the currentment of State: (If resigned	ent registered agent and register I, enter resigned)	red office on file with	the		
	NATIONAL CORPORAT	E RESEARCH, LTD., INC				
	155 NORTH CALHOUN	ST. SUITE 4				
	TALLAHASSEE	FL	32301		••	
6. The name and (if changed):	d street address of the new	registered agent (if changed) ar	nd/or registered office	;—; "	2019 OCT	
	Corporation Service Corr	npany 		भि स म	-9	
	1201 Hays Street			′	A	
	Tallahassee	P.O Box NOT acceptable FL	32301	<i>:</i> ,	ŧ. ö	4
The street address changed will	ess of its registered office be identical.	and the street address of the bu	usiness office of its re	egistered a	on igent,	
Such change was authorized by the	as authorized by resolution be board, or the corporation	n duly adopted by its board of an has been notified in writing	directors or by an off of the change.	icer so		
	ired to object or director		, Vice President			
I hereby accept I further agree performance of agent. Or, if th hereby confirm	the appointment as regist to comply with the provision my duties and am famili is document is being filed	ered agent and agree to act in ons of all statutes relative to th iar with and accept the obliga merely to reflect a change in t seen notified in writing of this	this capacity. he proper and completion of my position as he registered office a	ete s registere 1ddress, I	d	
By: Dra	sca Cokubie	· · · · · · · · · · · · · · · · · · ·	10/04/2019			
If signing on be	thalf of an entity:		Date			
	, Asst. Vice President					
T	yped or Printed Name					

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