Division of Corporations

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(((H200000167673)))



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To:

From:

Division of Corporations

Fax Number : (850)617~6380

Account Number : 120120000007

Account Name : INCORP SERVICES INC

Phone : (702)866-2500 Pan Numbur

1 (702)866 3689

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: documents @ Incorp.com

REGISTERED AGENT CHANGE FRIENDS OF THE CHILDREN-NATIONAL, INC.

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Jan 15, 2020 08:00 AM

Secretary of State

JAN 16 2020

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COVER LETTER				
TO: Amendment Section Division of Corporations	ৰ			
SUBJECT: Friends Of The Children-National, Inc.				
Name of Corporation				
DOCUMENT NUMBER: F18000001191				
The enclosed Statement of Change of Registered Office/A	gent and fee are submitted for filing.			
Please return all correspondence concerning this matter to	the following:			
Heather Glenn				
Name of Contact Person				
InCorp Services, Inc.				
Firm/Company	FILED			
3773 Howard Hughes Pkwy Suite 500S	Jan 15, 2020 08:00 AM			
Address				
Las Vegas, NV 89169-6014	Secretary of State			
City/State and Zip Code				
Documents@incorp.com				
E-mail address: (to be used for future annual report no	otification)			
For further information concerning this roatter, please call:				
Heather Glenn on behall of InCorp Services, Inc. a	, 702-866-2500			
Name of Contact Person	Area Code & Daytime Telephone Number			
Enclosed is a \$35.00 check made payable to the Department	nt of State.			
Mailing Address: Amendment Section	Street Address: Amendment Section			
Division of Corporations	Amenament Section Division of Corporations			
P.O. Box 6327	Clifton Building			
Tallahassee, FL 32314	2661 Executive Center Circle			
-	m 11 4			

Tallahassee, FL 32301

CR2E045 (04/13)

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

statement of chi	ange is submitted for a co	rporation organize	607.1508, or 617.1508, Flo ed under the laws of the Stat ed agent, or both, in the Stat	re of Oregon	
1. The name of	the corporation: Friends	Of The Children	-National, Inc.		_
2. The principal	l office address: 44 NE I	MORRIS ST			
	Portlan	d, OR 97212			
3. The mailing	address (if different):				_
4. Date of incor	poration/qualification:	03/12/2018	Document number:	F18000001191	_
	d street address of the cur utment of State: (If resign		nt and registered office on f	file with the	
	REGISTERED AGENTS	NC			
	7901 4Th Street Nor	th Suite 300			
	St. Petersburg, FL 3	3702			FILED
6. The name and (if changed):	d street address of the new	w registered agent (if changed) and for register	'	, 2020 08:00 A retary of State
	17888 67th Court No	orth			
	Loxahatchee, FL 33-	1 70			
The street address changed will	ess of its registered office I be identical.	e and the street ad	dress of the business office	e of its registered agent	,
Such change wathorized by the	as authorized by resoluti he board, or the corporat	on duly adopted b ion has been notifi	y its board of directors or b led in writing of the change	by an offic e r so e.	·
Vien.	Spenson		Terri Sorensen, Preside		
I hereby accept I further agree of my duties, ar document is be corporation has	i the appointment as reg to comply with the provi ad I am familiar with am ing filed merely to reflec s been notified in writing	stered agent and a sions of all statute t accept the obliga t a change in the r t of this change.	Printed or typed name agree to act in this capacity is relative to the proper am tion of my position as regi egistered office address, I		e 3 2
Heath	n J. Hen	<u></u>	December 3	11, 2019	
If signing on be	thalf of an entity:		Oale		
Heather Glenn	on behalt of InCorp Serv	ices, Inc.			
<u> </u>	yped or Printed Name	~			

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CRZED45 (04/13)