

F21 000005645

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

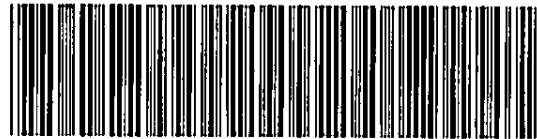
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## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Bartley J. Madden Foundation (d.b.a Bartley J. Madden Foundation Inc. in FL)  
Name of Corporation

**DOCUMENT NUMBER:** F21000005645

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Gregory Madden  
Name of Contact Person  
Bartley J. Madden Foundation  
Firm/Company  
27299 Riverview Center Blvd, Suite #105  
Address  
Bonita Springs, FL 34134  
City/State and Zip Code  
greg@maddenfoundation.org

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Greg Madden at ( 331 ) 250-0814  
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

**Mailing Address:**  
Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**  
Amendment Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

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

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of DE in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Bartley J. Madden Foundation Inc.  
 2. The principal office address: 27299 Riverview Center Blvd., Suite #105, Bonita Springs, FL 34134

3. The mailing address (if different): \_\_\_\_\_  
 4. Date of incorporation/qualification: 10-01-2021 Document number: F21000005645

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

CT Corporation System

1200 South Pine Island Road

Plantation, FL 33324

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Gregory L. Madden

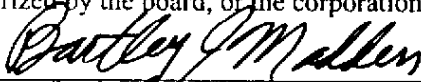
27299 Riverview Center Blvd., Suite #105

P.O. Box NOT acceptable

Bonita Springs, FL 34134

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.



Signature of an officer or director

Bartley J. Madden, Chairman

Printed or typed name and title

*I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.*

DocuSigned by:



Signature of Registered Agent

February 8, 2022

Date

If signing on behalf of an entity:

Typed 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

CR2E045 (04/13)