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Division of Corporations

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٥'n

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (614)280-3338 Fax Number : (954)208-0845

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REGISTERED AGENT CHANGE FEED THE CHILDREN, INC.

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

statement of cha	nge is submitted for a corporation	17.0502, 607.1508, or 617.1508, Florida Stati organized under the laws of the State of <u>OK</u> registered agent, or both, in the State of Flori	
1. The name of t	he corporation: FEED THE CHILD	REN, INC.	
	office address: 333 N. Meridian Av		
3.The mailing a	ddress (if different):		
4.Date of incorp	poration/qualification: 06/14/1993	Document number: F9300000275	66
	I street address of the current regis tment of State: (If resigned, enter	stered agent and registered office on file with tresigned)	he 2028.
	VAN P GEEKER		<u>.</u>
IGLER & DOUGHERTY, P.A.			
	1501 PARK AVENUE EAST TAL	LAHASSEE, FL 3230	0 f:1
6. The name and street address of the new registered agent (if changed) and /or registere (if changed):		ed agent (if changed) and /or registered office	4 6: 58
	C T Corporation System		
	c/o C T Corporation System, 1200 South Pine Island Road		
	P.O.B Plantation, Florida 33324	Box NOT acceptable	
The street addre	ess of its registered office and the be identical.	street address of the business office of its reg	gistered agent,
-		dopted by its board of directors or by an office een notified in writing of the change.	
Trav	ris W. Arnold	Travis Arnold- President & CEO	
I hereby accept I further agree i performance of agent, Or, if thi	the appointment as registered ag to comply with the provisions of a my duties, and I am familiar with	ent and agree to act in this capacity, dll statutes relative to the proper and complet and accept the obligation of my position as t to reflect a change in the registered office ad	registered
CT Cor By: Michael	poration System el Seraphin	April 9, 2020	
Sign	nature of Registered Agent	Date	
If signing on be	half of an entity:		
Michael Seraphit	<u> </u>		
13	qued 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 (03/12)