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To:

Division of Corporations

Fax Number : (850) 617-6380

From:

Account Name : CORPORATION SERVICE COMPANY

Account Number : 120000000195 Phone : (850)521-1000 Fax Number : (850)558~1575



## **REGISTERED AGENT CHANGE**

## SAINT GERMAIN FOUNDATION (CORPORATION)

88 BOT -7 AM 8: 06 ECRETARY OF STATE ELAHASSEE, FLORIDA

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

statement of cha	provisions of sections 607.0502, 617.050 unge is submitted for a corporation organ er to change its registered office or regist	rized under the laws of the State of <u>Illin</u>	oois
	the corporation: SAINT GERMAIN F	•	
	office address:		
	chedge Dr., Schaumburg, IL 60194		
3. The mailing a	address (if different):		
4. Date of incorp	poration/qualification: 03/11/1998	Document number: F98000001	384
	d street address of the current registered a rtment of State:	gent and registered office on file with th	e
	C T Corporation System		
	1200 South Pine Island Road		09 O
	Plantation, FL 33324		
6. The name and (if changed):	d street address of the new registered ager		OP OCT -7 PH 12: 01
	Corporation Service Company		F STIP
	1201 Hays Street		
	(P.O. Box NOT acceptable	)	- <del>1</del>
	Tallahassee, FL 32301	<u> </u>	
The street addr as changed will	ess of its registered office and the street be identical.	address of the business office of its rep	gistered agent,
Such change was authorized by the	as authorized by resolution duly adopte he board, or the corporation has been no	d by its board of directors or by an offi otified in writing of the change.	cer so
Nsa	ure of an officer of director)	Maureen Cullen, Attorney in Fa	ict
I hereby accept I further agree of my duties, an document is bel corporation ha	the appointment as registered agent an to comply with the provisions of all stated in a familiar with and accept the obline filed merely to reflect a change in the seen notified in writing of this change on Service Company	nd agree to act in this capacity. tutes relative to the proper and complet ligation of my position as registered ag ne registered office address, I hereby co t.	
By: Cy	gnature of Registered Agent)	10/05/2009 (Date)	
If signing on bo	chalf of an entity:	(5-4)	
	Dawson, Asst. Vice President Typed or Printed Name)		
`	* * * FILING FI	EE: \$35.00 * * *	