K60633

(Re	equestor's Name)		
(Ac	ldress)		
(Ad	ldress)		
(Cit	ty/State/Zip/Phone	#)	
PICK-UP	WAIT	MAIL	
-	د		
(Bu	isiness Entity Nam	ne)	
(Document Number)			
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SECRETARY OF STATE
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COVER LETTER

TO: Amendment Section Division of Corporations			
517.stoli of Corporations			
SUBJECT: Foray Enterprises, Inc.			
(Name of Corporation)			
DOCUMENT NUMBER: K60633			
The enclosed Statement of Change of Registered Office/Ag	ent and fee are submitted for filing.		
Please return all correspondence concerning this matter to the following:			
	-		
Dwaine Foray			
Dwaine Foray (Name of Contact Person)			
Foray Enterprises, Inc. (Firm/Company)			
(
318 Indian Trace, #509			
318 Indian Trace, #509 (Address)			
Weston, FL 33326 (City/State and Zip Code)			
For further information concerning this matter, please call:			
Dwaine Foray at	(954) 258-5878 (Area Code & Daytime Telephone Number)		
(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	Street Address: Amendment Section		
Amendment Section Division of Corporations	Amendment Section Division of Corporations		
P.O. Box 6327	Clifton Building		
Tallahassee, FL 32314	2661 Executive Center Circle		
	Tallahassee, FL 32301		

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

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida St inge is submitted for a corporation organized under the laws of the State of <u>f</u> ir to change its registered office or registered agent, or both, in the State of Fl	Florida		
1. The name of t	the corporation: Foray Enterprises, Inc.			
	office address: 2900 Glades Circle, Suite 325, Weston, FL 33327			
3. The mailing a	address (if different): 318 Indian Trace, #509, Weston, FL 33326			
4. Date of incorp	poration/qualification: January 17, 1989 Document number: K60633			
	d street address of the current registered agent and registered office on file with the threat of State:	h the		
	Dwaine Foray			
	2900 Glades Circle, Suite 325	TAS OF		
	Weston, FL 33327	ECRE T		
6. The name and (if changed):	d street address of the new registered agent (if changed) and /or registered office	ILED TARY OF TASSEEF		
	Scott J. Levine	N 12:		
	1900 N. Commerce Parkway	AUE 16		
	(P.O. Box NOT acceptable) Weston, FL 33326			
The street address changed will	ess of its registered office and the street address of the business office of its be identical.	s registered agent,		
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) DWAINE FORAY PRESIDENT (Printed or typed name and title)				
I hereby accept I further agree of my duties, an document is bei corporation has	the appointment as registered agent and agree to act in this capacity. to comply with the provisions of all statutes relative to the proper and com id I am familiar with and accept the obligation of my position as registered ing filed marely to reflect a change in the registered office address, I hereb s been notified in writing of this change.			
	fature of Registered Agent) 5/12/16 (Date)			
	chalf of an entity:			
Scott	J. Leuhe, Esq.			

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