M14784

(Requestor's Name)					
(Address)					
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(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
<u> </u>					
(Business Entity Name)					
(Document Number)					
Cartificat Caning Cartificator of Status					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					
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02/10/12--01022--004 **35.00



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COVER LETTER

Amendment Section Division of Corporations

TO:

SUBJECT:	C.F. Holdings, Inc. Name of Corporation
	Name of Corporation
DOCUMENT NUMBER:	M14784
The enclosed Statement of Change	of Registered Office/Agent and fee are submitted for filing.
Please return all correspondence co	ncerning this matter to the following:
	Neil Faggen, Esquire Name of Contact Person
	Name of Contact Person
	Coregroup, Inc. Firm/Company
1	101 Favette Street, Second Floor Address
	Address
·	Conshohocken, PA 19428 City/State and Zip Code
F-mail address	neil.faggen@gmail.com : (to be used for future annual report notification)
is man address.	. (to be used for retaile aiman report notification)
For further information concerning	this matter, please call:
Neil Fagger	at (610) 825-8300 Son Area Code & Daytime Telephone Number
Name of Contact Pe	son Area Code & Daytime Telephone Number
Enclosed is a \$35.00 check made pa	yable 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
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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

Pursuant to the provisions of sections 607.0502, (statement of change is submitted for a corporation in order to change its registered office of	n organized	d under the laws of the Stat	e of <u>Florida</u>
1. The name of the corporation: C.F. Holding	ıs, Inc.		
2. The principal office address: <u>c/o 16400 N.W</u>	/, 2nd Av	enue,	
Suite 200, Miami, FL 33169	_		
3. The mailing address (if different): c/o 16400	N.W. 2nd	Avenue.	
Suite 200, Miami, FL 33169			
4. Date of incorporation/qualification:04/30	1/1985	Document number:	M14784
5. The name and street address of the current regis Florida Department of State: (If resigned, enter	_	t and registered office on fi	le with the
Jeffrey Chodorow			
404 Washington Ave			No.
Miami Beach, FL 33139		·	d office &
6. The name and street address of the new register (if changed):	ed agent (if	f changed) and /or registere	
Jeffrey Chodorow			PH 12: 16
16400 N.W. 2nd Avenue, S	Suite 200 Box NOT acc	eptable	
Miami, FL 33169			
The street address of its registered office and the as changed will be identical.	street add	ress of the business office	of its registered agent,
Such change was authorized by resolution duly authorized by the board, or the corporation has been such as the corporation of the corporation has been such as the corporation of the corporation has been such as the corporation has been such as the corporation of the corporation has been such as the corporation of	adopted by been notific	its board of directors or bed in writing of the change	by an officer so
Signature of an officer or director		Jeffrey Chodol Printed or typed name	row Pres
hereby accept the appointment as registered as further agree to comply with the provisions of a further agree to comply with the provisions of a function with and accept to cument is being filed merely to reflect a change corporation has been notified in writing of this corporation.	gent and ag all statutes the obligat ge in the re change.		•
11		2-7-12	
Signature of Registered Agent		Date	
f signing on behalf of an entity:			
Typed or Printed Name	-		

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

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