

N01000008387

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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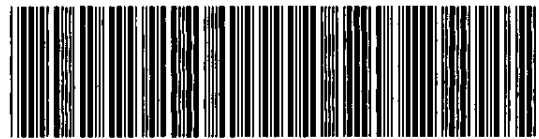
(Business Entity Name)

(Document Number)

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each *1/5/09*

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: CROSS INTERNATIONAL CATHOLIC OUTREACH, I
Name of Corporation

DOCUMENT NUMBER: N01000008387

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:

Mariana Marin
Name of Contact Person

Firm/Company

600 SW 3 Street Suite 2201
Address

Pompano Beach FL 33060
City/State and Zip Code

jcavnar@crossinternational.org
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Mariana Marin at (954) 657-9000
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
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, 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 Florida in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: CROSS INTERNATIONAL CATHOLIC OUTREACH, INC.
2. The principal office address: 370 W Camino Gardens Blvd
Boca Raton FL 33432
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 11/30/2001 Document number: N01000008387

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)

GY Corporate Services, Inc

777 SOUTH FLAGLER DR. SUITE 500 EAST

WEST PALM BEACH FL 33401 US

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

Mariana Marin

600 SW 3rd Street Suite 2201

P.O. Box NOT acceptable

Pompano Beach FL 33060

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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.

James J. Cavnar
Signature of an officer or director

James J Cavnar
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.

Mariana Marin
Signature of Registered Agent

December 21, 2009
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 (8/05)