Florida Department of State

Division of Corporations Public Access System

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(((H08000142607 3)))



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REGISTERED AGENT CHANGE

THE CHILDREN'S FOUNDATION, INC.

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6/2/2008

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS H08000142607 3

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: THE CHILDREN'S FOUNDATION, INC.	
2. The principal office address: 1600 SOUTH ANDREWS AVENUE, FORT LAUDERDALE, FL 33316	
3. The mailing address (if different): 303 SE 17TH STREET #605, FORT LAUDERDALE, FL 33316	
4, Date of incorporation/qualification: 04/16/2002 Document number: N02000002773	<u> </u>
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:	
LAURA SEIDMAN SU SEIDMAN	
303 SE 17TH ST.	
FORT LAUDERDALE, FL 33316	, F.
EAURA SEIDMAN 303 SE 17TH ST. FORT LAUDERDALE, FL 33316 6. The name and street address of the new registered agent (if changed) and /or registered office (if changed): TROY A. KISHBAUGH 303 SE 17 ST	£ (
TROY A. KISHBAUGH	£ 23
<u> </u>	ø.
(F.O. Box NOT acceptable) FORT LAUDERDALE, FL 33316	
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.	
Frank 1. DSK President (C) (Signature of an officer or director) Frank 1. DSK President (C)	Œ
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 accument is being filed marrow to resize on change in the registered office address, I hereby confirm that the appropriation has been hosting in whiting of this change.	
(Signature of Registree Labor) If signing on behalf of an entry	
- · · · · · · · · · · · · · · · · · · ·	
(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)

