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TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations
SUBJECT: BROTHERS OF THE GOOD SHEPHERD OF 14A171, INC. (Name of corporation)
DOCUMENT NUMBER: NO20000 3762
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:
JOSEAH CHARRON (Name of person)
(Name of firm/company)
336 NW STH STREET (Address)
MIAMI FL 33128 (City/state and zip code)
For further information concerning this matter, please call:
BROTHER JOSEPH CHARRON at (305) 577-4840 EXT 308 (Name of person) (Area code & daytime telephone number)
Enclosed is a \$35.00 check made payable to the Department of State.
Mailing Address:Street Address:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327409 E. Gaines StreetTallahassee, FL 32314Tallahassee, FL 32399

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, Florid	
this statement of change is submitted for a corporation organized under the laws of the State	•
FLORIDA in order to change its registered office or registered agent, or both, of Florida.	in the State
1. The name of the corporation: BROTHERS OF THE GOOD SHEPHERD OF	HAITI INIO
2. The principal office address: 680 NE 52 STREET	
MIAMI FL 33137	<u> </u>
3. The mailing address (if different):	
5. The hanning address (if different).	
4. Date of incorporation/qualification: 5-16-02 Document number: No24	200003762
5. The name and street address of the current registered agent and registered office on file wi Florida Department of State:	th the
MICHAEL MIESZALA	
680 NE 52 STREET	
MIAMI FL 33137	
6. The name and street address of the new registered agent (if changed) and /or registere changed):	d office (if
JOSEPH CHARRON	
(P.O. Box or personal mailbox NOT acceptable)	-
MIAMI FL 33/37	
The street address of its registered office and the street address of the business office of its agent, as changed will be identical.	registered
Such change was authorized by resolution duly adopted by its board of directors or by an of authorized by the board, or the corporation has been notified in writing of the change.	officer so
Signature of an officer, chairman of vice chairman of the board) (Printed or typed name and title)	SECRETARY
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 comperformance of my duties, and I am familiar with and accept the obligation of my position registered agent. Or, if this document is being filed merely to reflect a change in the regis office address, I hereby confirm that the corporation has been notified in writing of this ch	olete as tered ange. \$\ightarrow\tag{c}
Signature of Registered Agent) (Date)	
If signing on behalf of an entity:	FILE FIARY EC 23
(Typed or Printed Name) (Capacity)	<u> </u>
* * * FILING FEE: \$35.00 * * *	27 95
MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE AND MAIL TO: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314	O Dm