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SECRELAR CONSTAIR

R.A. Change

Office Use Only

TRANSMITTAL LETTER

Amendment Section Division of Corporations

TO:

SUBJECT: FUTURE VISION ASSOCIATION, INC. (Name of corporation)							
(tvanie of corporation)							
DOCUMENT NUMBER: WO2000032429							
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:							
Valorie Parker							
(Name of person)							
Future Visions Association, Inc.							
(Name of firm/company)							
PO Box 190414							
(Address)							
Fort Lauderdale, Florida 33068							
(City/state and zip code)							
For further information concerning this matter, please call:							
Valorie Parker at (954) 72 409 (Name of person) (Area code & daytime telephone number)							
(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							

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

Pursuant to the	provisions of sections	607.0502, 617	7.0502, 607.1508,	or 617.150	8, Florida	Statutes,
	^c change is submitted fo	-	-	_	•	
Florida	in order to chan	ige its registere	ed office or regist	ered agent, c	or both, in	the S tate
of Florida.	. Esturo	Vinion: Acros	dation Inc.	.	· 4/5	3 %
	he corporation: Future				-	
2. The principal	office address: 1717 N	North Bayshore [Drive, Suite 2824		<u></u>	700
Miami, Florid	a 33122		· 			1
3. The mailing a	ddress (if different):_P	.O. Box 190414		·	<u>.</u>	
	F	ort Lauderdale,	Florida 33068	L	- 7	¥7,
4. Date of incorp	ooration/qualification: _	10/2/02	Docume	nt number: _	NO2000	10075
	I street address of the creaters of the creaters of State:	urrent registere	d agent and regist	ered office or	n file with t	the
r foxida Dopai	Ω	ROWN_S	R			
		<u> </u>	DRIVE S	TE. 2854		
	Miami, FI	. 3312	- 1			•
6. The name ar	d street address of the	new registere	d agent (if chang	ed) and /or i	registered o	office (if
changed):	Valo	orie Parker		·		,
		8 Winners Circle	₹.	,		
_		Box or personal mailbo				
-	N. L	auderdale, Florid	da 33068			
agent, as change	ess of its registered officed will be identical.					
Such change wa authorized by th	is authorized by resolute board, or the corpora	tion duly adopt ation has been i	ted by its board of notified in writing	f directors or g of the chan	by an office.	cer so
Leslint	nom Si.	<u></u>	Leslie Br	4 -	<u> </u>	<u> </u>
I hereby accept I further agree i performance of registered agen	the appointment as rest to comply with the proving the	gistered agent o visions of all st miliar with and is being filed i	and agree to act i atutes relative to d accept the oblig mercly to reflect d	ation of my f i change in t	ity. Ind comple position as he register	ed
- Vale	gnature of Registered Agent)		12-18	(Date)		<u></u> . •
If signing on behal						
• •	alorie Parker	, –	Secretary / Treasu	rer / Registere	ed Agent	
(1	yped or Printed Name)	<u> </u>		(Capacity)	·	
	* * *	FILING FE	E: \$35.00 * * *			