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CSC - WILMINGTON
251 Little Falls Drive
Wilmington De 19808

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Ami Casper ami.casper@cscglobal.com

Date: July 27, 2017

Order#: 744258/005

Re: KNOPF FAMILY FOUNDATION, INC.

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$35 .

Please take the following action:

XX File in your office on a routine basis.

XX Issue Proof of Filing.

XX Return Regular Mail in the enclosed envelope.

Attn:Ami Casper c/o Corporation Service Company 251 Little Falls Drive Wilmington, DE 19808

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

INCA.XCOA

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

ale cone	ovisions of sections b ge is submitted for a c to change its register	corporation organize	ed under the law:	s oj ine siale oj 📺	
	e corporation: KNOF	PF FAMILY FOUND	ATION, INC.		
<ol> <li>The name of the</li> <li>The principal of</li> </ol>	ffice address: 6680 5	SE Harbor Circle, St	uart, FL 34996		
	dress (if different):				
4 Day Singapor	oration/qualification:	07/22/2003	Document r	number: N030000	06252
5. The name and	street address of the oment of State: (If resi	current registered ag	ent and registere		
_	Frank J. Rief, III				•
•	202 S. Rome Avenue, Suite 100				
-	Tampa, FL 33606				7
6. The name and (if changed):	street address of the		t (if changed) an	d /or registered off	ice 23
	1201 Hays Street				: : 7
	Tallahassee	PO Box NOT	FL	32301	
	ess of its registered of be identical. as authorized by resone board, or the corp	design duly adopted	hy its board of	directors of by an	s registered agent.
authorized by the	ne hoard, or the corp	Orangon has been no	Joseph Robert	t, Chief Financial C	Officer
I hereby accept I further agree performance of agent. Or, if th	the appointment as to comply with the promise and I am is document is being that the corporation Service Comp	familiar with and of filed merely to refler has been notified in	d agree to act in utes relative to t accept the obliga-	ttion of my position the registered offic	i plete i as registered
By: (Li	mleil.		07/27	7/2017	<del></del>
Sig	gnature of Registered Agent chalf of an entity:			Date	1
Ami M. Casper	r. Asst. Vice Preside	nt			•
	Typed or Printed Name		rr. 622 AA * *		

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