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SECULIARY OF STATE
DIVISION OF CORPORATIONS

17. IIII -7 PM L: 03

C. LEWIS JUL 23 2014

COVER LETTER

TO: Amendment Section Division of Corporations

Friends of the Biyala Yeshiva Corp

N03000007081

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:

Jerry Howell

Name of Contact Person

Corporate Filing Solutions Inc.

Firm/Company

906 W. 2nd Ave. Ste 100

Spokane, WA 99201
City/State and Zip Code

research@llcagent.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jerry Howell

Name of Contact Person

at (857) 453-3698 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

statement of cha	nge is submitted for a corporation	17.0502, 607.1508, or 617.1508, Florida Statute. corganized under the laws of the State of <u>MA</u> registered agent, or both, in the State of Florida		
1. The name of t	he corporation: Friends of the	e Biyala Yeshiva Corp		
2. The principal	office address: 199 LEE AVE	. 178 BROOKLYN, NY 112110		
-				
3. The mailing a	ddress (if different):			
4. Date of incorp	poration/qualification: 02/04/20	Document number: N03000007	7081	
	street address of the current registment of State: (If resigned, enter	tered agent and registered office on file with the resigned)		
	CORPORATE FILING S	SOLUTIONS, LLC		
	155 OFFICE PLAZA DF	RIVE SUITE A		
	TALLAHASSEE, FL 323	301	14	Égn N
6. The name and (if changed):	street address of the new register	ed agent (if changed) and /or registered office	4 JUL -7	
	CORPORATE FILING S	SOLUTIONS	PH	
	3030 N. ROCKY POINT		ւ ; 03	YATION ATION
	TAMPA, FL 33607	Box NOT acceptable		តិ
The street address changed will	ess of its registered office and the be identical.	street address of the business office of its regis	tered age	nt,
Such change wa authorized by th	s authorized by resolution duly a se board, or the corporation has b	dopted by its board of directors or by an officer een notified in writing of the change.	so	
Signatu	re of an officer or director	Printed or typed name and title		-
I further agree i performance of agent. Or, if the	to comply with the provisions of a my duties, and I am familiar with	ent and agree to act in this capacity. all statutes relative to the proper and complete and accept the obligation of my position as reg to reflect a change in the registered office addr tified in writing of this change.	gistered ess, I	
gn		6/18/2014		
-	nature of Registered Agent	Date		_
	half of an entity:			
Dan Keen	Manager yped or Printed Name			
*.	, ,			

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