

N03000007687

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

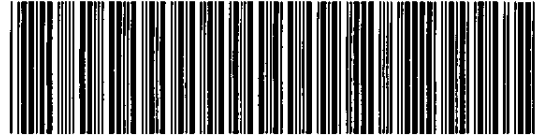
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

B.A.

FEB 28 2012

T. BROWN

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: South Palm Beach County FAWL, Inc.
Name of Corporation

DOCUMENT NUMBER: N03000007687

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:

Melissa Melzer
Name of Contact Person

American Red Cross
Firm/Company

825 Fern Street
Address

West Palm Beach, FL 33401
City/State and Zip Code

Melissa.Melzer@redcross.org
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Melissa Melzer at (561) 281-1926
Name of Contact Person 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**

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: South Palm Beach County FAWL, Inc.
2. The principal office address: 700 N. Olive Avenue, Suite 200, West Palm Beach, FL 33401

3. The mailing address (if different): 825 Fern St., West Palm Beach, FL 33401

4. Date of incorporation/qualification: 9/5/2003 Document number: N03000007687

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

Mindy Stein, P.A.

2300 Glades Road, Suite 203 East

Boca Raton, FL 33431

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Mindy Stein, P.A.

700 S. Federal Highway, Suite 200

P.O. Box NOT acceptable

Boca Raton, Florida 33432

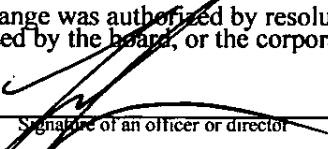
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

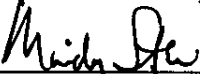
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.


Signature of an officer or director

Melissa Melzer, Treasurer

Printed or typed name and title

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 document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.



Signature of Registered Agent

Feb. 21, 2012

Date

If signing on behalf of an entity:

Mindy Stein, P.A.

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