

N/0400000000 15

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

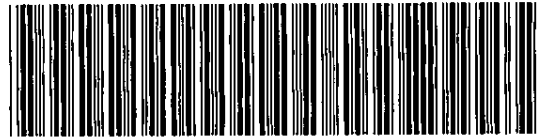
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



700268253347

RECEIVED
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
15 JAN 22 PM 4: 37
NOT INTENDED
TO ACKNOWLEDGE
SUFFICIENCY OF FILING

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
15 JAN 20 PM 12: 51

JAN 23 2015
T. CARTER

ACCOUNT NO. : I20000000195

REFERENCE : 470581 7804100

AUTHORIZATION :

Lynette Cleman

COST LIMIT : \$ 35.00

ORDER DATE : January 22, 2015

ORDER TIME : 3:45 PM

ORDER NO. : 470581-005

CUSTOMER NO: 7804100

CHANGE OF AGENT

NAME: MASOOD FAMILY FOUNDATION, INC.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_____ CERTIFIED COPY
XX _____ PLAIN STAMPED COPY

CONTACT PERSON: Courtney Williams -- EXT# 62935

EXAMINER: _____

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Masood Family Foundation, Inc.
Name of Corporation

DOCUMENT NUMBER: N0400000015

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:

Habib Rahman, Esquire
Name of Contact Person

Firm/Company

30 Westland Road
Address

Weston, MA 02493
City/State and Zip Code

hr1726@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Habib Rahman at (781) 647-7748
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: Masood Family Foundation, Inc.
2. The principal office address: 7940 Front Beach Road, PMB 159, P C Beach, FL 32407
3. The mailing address (if different): _____
4. Date of incorporation/qualification: December 29, 2003 Document number: N0400000015
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)

Mona Masood
5004 Thomas Drive # 110
P C Beach, FL 32407

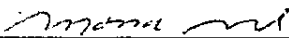
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Corporation Service Company
1201 Hays Street
Tallahassee P.O. Box NOT acceptable FL 32301

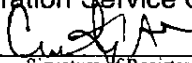
FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
15 JAN 20 PM 12:51

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.

 Mona Masood, Secretary
Signature of an officer or director 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.

Corporation Service Company
By:  01-22-15
Signature of Registered Agent Date

If signing on behalf of an entity:
Courtney Williams
Asst. Vice President
Typed or Printed Name

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