

N04000001415

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## COVER LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: SOUTH FLORIDA FRIENDS OF THE ARTS, INC.  
(Name of corporation)

DOCUMENT NUMBER: N04000001415

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:

SAMANTHA J. FITZGERALD, ESQ.  
(Name of contact person)

FOWLER WHITE BURNETT P.A.  
(Firm/Company)

1395 BRICKELL AVENUE, 14TH FLOOR  
(Address)

MIAMI, FL 33131  
(City/state and zip code)

For further information concerning this matter, please call:

SAMANTHA J. FITZGERALD at (305) 789-9200  
(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  
409 E. Gaines Street  
Tallahassee, FL 32399

**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 FLORIDA FRIENDS OF THE ARTS, INC.
2. The principal office address: 4689 PONCE DE LEON BOULEVARD, SUITE 300  
CORAL GABLES, FLORIDA 33146
3. The mailing address (if different): \_\_\_\_\_
4. Date of incorporation/qualification: 2/11/2004 Document number: N04000001415
5. The name and street address of the current registered agent and registered office on file with the  
Florida Department of State:

AUDREY ROSS

4689 PONCE DE LEON BLVD., SUITE 300

CORAL GABLES, FL 33146

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

JOANNE NORMAN SCHULTE

6240 MAGGIORE STREET

(P.O. Box NOT acceptable)

CORAL GABLES, FL 33146 34

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.

Audrey H. Ross  
(Signature of an officer or director)

Audrey H. Ross  
(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.*

Joanne Norman Schulte  
(Signature of Registered Agent)

May 20, 2005  
(Date)

If signing on behalf of an entity:

Joanne Norman Schulte  
(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

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