

NO6000006131

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

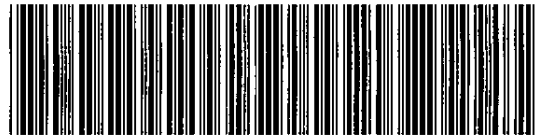
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TALLAHASSEE, FLORIDA

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## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** New Hope for Africa, Inc.  
(Name of Corporation)

**DOCUMENT NUMBER:** N06000006131

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:

Roxyana Washington  
(Name of Contact Person)

New Hope for Africa, Inc.  
(Firm/Company)

PO Box 361377  
(Address)

Melbourne Florida 32936-9998  
(City/State and Zip Code)

For further information concerning this matter, please call:

Roxyana Washington at ( 321 ) 427 4548  
(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: New Hope for Africa, Inc.
2. The principal office address: 385 Cherry Drive, Satellite Beach Florida 32937
3. The mailing address (if different): PO Box 361377, Melbourne Florida 32936-9998
4. Date of incorporation/qualification: June 8, 2006 Document number: N06000006131
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)

Maryam M Solola (resigned)

927 Osprey Drive

Melbourne, Florida 32940

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

Reginald Washington

385 Cherry Drive

(P.O. Box NOT acceptable)

Satellite Beach, Florida 32937

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.

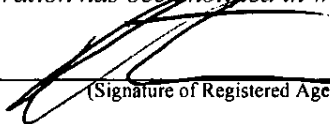


(Signature of an officer or director)

Roxana Washington, President

(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)

February 1, 2009

(Date)

If signing on behalf of an entity:

(Typed or Printed Name)

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

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