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09/25/17--01013--001 **35.00



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| COVER LETTER | | | | |
|--|--|--|--|--|
| TO: Amendment Section Division of Corporations | | | | |
| SUBJECT: REGISTERED AGENT'S CHANGE OF ADDRESS | | | | |
| Name of Corporation | | | | |
| DOCUMENT NUMBER: N0700005550 | | | | |
| | | | | |
| 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: | | | | |
| DANIEL D. DIAZ | | | | |
| Name of Contact Person | | | | |
| ACE FOUNDATION, INC. | | | | |
| Firm/Company | | | | |
| 6255 BIRD ROAD | | | | |
| Address | | | | |
| MIAMI, FLORIDA 33155 | | | | |
| City/State and Zip Code | | | | |
| DDIAZ@THEACEFOUNDATION.ORG E-mail address: (to be used for future annual report notification) | | | | |
| a man address. (to be ased for fathe annual report notified for) | | | | |

For further information concerning this matter, please call:

MARJORIE BENET

Name of Contact Person

305) 669-2906 Area Code & Daytime Telephone Number

at (

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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

CR2E045 (03/12)

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: ACE FOUNDATION, INC.

2. The principal office address: 6255 BIRD ROAD MIAMI, FLORIDA 33155

3. The mailing address (if different): 6340 SUNSET DRIVE MIAMI, FLORIDA 33143

| Date of incorporation/qualification: 05/31/20 | 007 Document number: N07000005550 |
|---|-----------------------------------|
| | |

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)

DIAZ, DANIEL D

6445 SUNSET DRIVE MIAMI, FLORIDA 33143

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

DIAZ, DANIEL D

6255 BIRD ROAD MIAMI, FLORIDA 33155

P.O. Box_NOT acceptable

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

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

Signature of an officer or

DANIEL D. DIAZ, OFFICER

Printed or typed name and title

U M

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 ham familiar with and accept the obligation of my position as registered agent. Or, if this documentais being filed merely to reflect a change in the registered office address, I hereby confirm that the *opportation* has been notified in writing of this change.

Signature of Registered Agent

9/1/2017

Date

If signing on behalf of an entity:

| ACE | FOU | NDA | TION, | INC. |
|-----|-----|----------|-------------|------|
| | | Typed or | r Printed N | ame |

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