## 2008 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# N07000011802

Entity Name: 4 GIRLS FOUNDATION, INC.

FILED Oct 24, 2008 Secretary of State

| Current Principal Place of Business: | New Principal Place of Business |
|--------------------------------------|---------------------------------|
|                                      |                                 |

7620 NORTH CYPRESSHEAD DRIVE 480 SOUTH ANDREWS AVE PARKLAND, FL 33067

SUITE 103

POMPANO BEACH, FL 33069

**Current Mailing Address:** New Mailing Address:

7620 NORTH CYPRESSHEAD DRIVE 480 SOUTH ANDREWS AVE PARKLAND, FL 33067 SUITE 103

POMPANO BEACH, FL 33069

FEI Number: 26-1739189 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

CFRA, LLC CORPORATE CENTER THREE AT INTL. PLAZA 4221 W. BOY SCOUT BOULEVARD - 10TH FLOOR TAMPA, FL 336075736 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: JOSE LOREDO

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete ( ) Change (X) Addition

PERKINS, RANDY Name: Name:

Address: Address: 480 SOUTH ANDREWS AVE, SUITE 103

City-St-Zip: City-St-Zip: POMPANO BEACH, FL 33069

Title: Title: ( ) Change (X) Addition ( ) Delete

Name: Name: PERKINS, SAILY

Address: Address: 480 SOUTH ANDREWS AVE. SUITE 103

City-St-Zip: City-St-Zip: POMPANO BEACH, FL 33069

Title: () Delete Title: DST ( ) Change (X) Addition

Name: LOREDO, JOSE Name:

100 SE SECOND STREET, SUITE 4000 Address: Address:

City-St-Zip: City-St-Zip: MIAMI, FL 33131

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOSE LOREDO D 10/24/2008