

NO80000004384

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

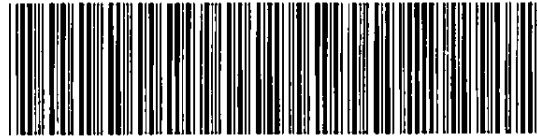
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

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400408441084

RA & RO Change

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2023 MAY 25 AM 11:34

CLERK OF STATE
TALLAHASSEE, FLORIDA

FILED


2023 MAY 25 AM 9:33

CLERK OF STATE
TALLAHASSEE, FLORIDA

A. RAMSEY

MAY 26 2023

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195
REFERENCE : 769223 5157078
AUTHORIZATION : 
COST LIMIT : \$135.00

ORDER DATE : May 24, 2023
ORDER TIME : 9:46 AM
ORDER NO. : 769223-005
CUSTOMER NO: 5157078

CHANGE OF AGENT

NAME: ROBERT S WENNETT AND MARIO
CADER-FRECH FOUNDATION, INC.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

____ CERTIFIED COPY
XX _____ PLAIN STAMPED COPY

CONTACT PERSON: Eyliena Baker -- EXT#

EXAMINER: _____

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Robert S Wennett and Mario Cader-Frech Foundation, Inc.
Name of Corporation

DOCUMENT NUMBER: N08000004384

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:

Suset Lopez

Name of Contact Person

UIA Management, LLC

Firm/Company

2151 NW 13 Ave, Unit 15

Address

Miami, FL 33142

City/State and Zip Code

slopez@uiamanagement.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Suset Lopez

Name of Contact Person

at (305) 401-4286
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
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

**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: Robert S. Wennett and Mario Cader-Frech Foundation, Inc.
2. The principal office address: 2151 NW 13 Ave, Unit 15, Miami, FL 33142
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 05/04/2008 Document number: N08000004384
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)

Mario Cader-Frech

2151 NW 13 Ave, Unit 15

Miami

FL 33142

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

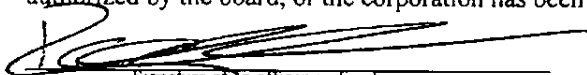
P.O. Box NOT acceptable

Tallahassee

FL 32301

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

Robert S. Wennett 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: 
Signature of Registered Agent

05/25/2023

Date

If signing on behalf of an entity:

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

CR2E045 (04/13)

2023 MAY 25 AM 9:33
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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