

NO700006210

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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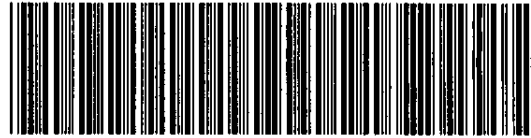
(Business Entity Name)

(Document Number)

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14 NOV -6 AM 5:37  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

NOV 11 2014

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Tico Torres Children Foundation, Inc.  
Name of Corporation

**DOCUMENT NUMBER:** N08000006210

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:

Joseph Apuzzo

Name of Contact Person

Joseph Apuzzo, CPA

Firm/Company

150 Airport Road - Suite 1000

Address

Lakewood, New Jersey 08701

City/State and Zip Code

joe@joeapuzzocpa.com

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

For further information concerning this matter, please call:

Joseph Apuzzo

Name of Contact Person

at ( 732 ) 730-8900

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: TicoTorres Children Foundation, Inc.
2. The principal office address: 8540 SW 52 Avenue  
Miami, Florida 33143
3. The mailing address (if different): C/O Joseph Apuzzo, CPA  
150 Airport Road - Suite 1000 - Lakewood, NJ 08701
4. Date of incorporation/qualification: June 30, 2008 Document number: N08000006210
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)

Hector S. Torres  
470 Mariner Drive  
Jupiter, Florida 33477

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

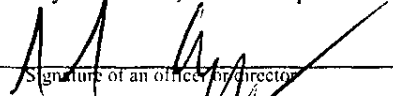
Hector S. Torres  
8540 SW 52 Avenue  
P.O. Box NOT acceptable  
Miami, Florida 33143

14 NOV -6 AM 5:37  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

RECEIVED  
AND  
FILED

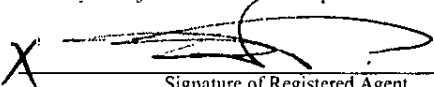
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

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

Joseph Apuzzo - Treasurer  
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

10/27/14  
Date

If signing on behalf of an entity:

Hector S. Torres  
Typed or Printed Name

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