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THE FLORIDA ISRAEL BUSINESS FORUM, INC.

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ב / ככויו ושטענוני

2012/012

STATEMENT OF CHANGE OF REGIS	TERED OF R CORPOR	FPICE OR REGISTEREI RATIONS) agent	OR BO	ΓH
Pursuant to the provisions of sections 607.050 statement of change is submitted for a corpora in order to change its registered offic	illon organiz	ed <mark>under the la</mark> ws of the Stat	e of Flori	da	<u> </u>
1. The name of the corporation: The Floric	la Israel	<u>Business Forum, In</u>	c		
2. The principal office address: 2229 Sherld	an Street	, Hollywood, Florida 33	020		
3. The mailing address (if different):					
4. Date of incorporation/qualification:	N080	000010983			
5. The name and street address of the current in Florida Department of State: (If resigned, en	egistered age ter resigned)	ent and registered office on fi	le with the		
Raquel A. Rodriguez, E	sq.				
201 S. Biscayne Boulet			201		
Miami, FL 33131					A POR
6. The name and street address of the new regi (if changed):	(if changed) and /or registers	d office		26 PM	
200 S. Biscayne Bouley		AND	5: 5		
Miami, FL 33131	P.O. Box NOT o	cecpuble		The second	(GE)
The street address of its registered office and as changed will be identical.	the street ac	dress of the business office	of its reg	istered ag	ent,
Such change was authorized by resolution du authorized by the board, or the corporation has	ly adopted b as been notif	y its board of directors or t red in writing of the chang	y an offic :.	or SÕ	
Signature for all entrigo or director		Raquel A. Rodr	iquez, E	sq.	
I hereby accept the appointment as registered I further agree to comply with the provisions of my duties, and I am familiar with and acced accument is being filed merely to reflect a che corporation has been notified in writing of the	l agent and i of all statute of the obligi unge in the i is change.	agree to uct in this capacity as relative to the proper und ation of my position as regi egistered office address. It	i complete stered age hereby con	performe nt. Or if ifirm that	mce this the
1150 VA/ \-		4-19-1	1		

Typed or Printed Name

If signing on behalf of an entity:

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
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