NOS 0000 11544

(Desurable de Nerres)
(Requestor's Name)
(Address)
((100.000))
(Address)
(City/State/Zip/Phone #)
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
Office Use Only
Once Ose Only

•

٠



01/13/20~-01003--028 **105.00

2020 J. 13 PH 12: 56

R. 1.VH!TE FEB 11 2010

COVER LETTER

DOCUMENT NUMBER:

TO: Amendment Section Division of Corporations

tounda tion SUBJECT: Name of Corporation

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:

Name o I N Firm/ ompany 208 Address VD0TU City/State and Zip Code firm com CSen E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

at Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

<u>Mailing Address</u>: 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 (04/13)

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 Floreboon_______ in order to change its registered office or registered agent, or both, in the State of Florida

1. The name of the corporation	Donte's Den Foundation	
	6801 283rd St E	
	MYAKKA City PL 34251	

3 The mailing address (if different)

- 4. Date of meorporation/qualification 13/34/08 Document number N08000011544
- 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)

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

The street address of its registered office and the street address of the business office of its registered agent. σ 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 comporation has been notified in writing of the change

KENNETH J. しんく ma LONG, CFO Segnature of an officer

I hereby accept the appointment as redistered 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 affice address. Thereby confirm that the corporation has been notified inserting of this change.

igna were Repistered Agent

11612020

if signing on behalf of an entity

Ivpal or Printed Came

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEF, FL 32314 UR2E045 (04/13)