N09000000/50

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SECRETARY OF STATE
TALLANASSEE, FLORIDA

M3-2-11

COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Project Lifesaver of Palm Beach County, Inc. Name of Corporation
DOCUMENT NUMBER: N0900000 150
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:
Michelle Damone Name of Contact Person
Project Lifesaver of Palm Beuch County Inc. Firm/Company
5800 Corporate Way
West Falm Beach, FC 33407 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Michael Damone at (561) 315 - 2913 Name of Contact Person 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 Street Address: Amendment Section Division of Corporations Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301

Tallahassee, FL 32314

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: Project Lifesquer of Palm Beach County Inc.
1. The name of the corporation: Project Lifesquer of Palm Beach County Frc. 2. The principal office address: 5800 Corporate Way, West Palm Beach, Fc
33407
3. The mailing address (if different): Same
4. Date of incorporation/qualification: 17 8 Document number: N0900000150
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)
United States Corporation Agents Inc.
1330a Winding Oaks Blud. Suite A-100 77 Tampa, FL 33612
Tampa, Fr. 33612
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
POBERT J. KANJIAN
314 CLEMATIS ST. #201 P.O. BOX NOT acceptable
WEST PALM BEACH, FL 33401
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.
Michelle Damone, Ireasurer Michelle Damone, Ireasurer Elizabeth Lugo President Printed or typed wante had 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.
2/15/11
Signature of Registered Agent 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 (8/05)