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COVER LETTER

Division of Corporations		
SUBJECT: FRIEND'S ST FISHER HOUSE THE Name of Corporation		
DOCUMENT NUMBER: No 9 00 00 1213		
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:		
Jerus A Klew Name of Contact Person		
FRIEND'S OF FISHER House IVC		
, , ,		
900 Oscavla DE Suite 301A		
West Palm Beach F1 33409 City/State and Zip Code		
E-mail address: (to be used for future annual report notification)		
For further information concerning this matter, please call:		
Territorial Person at (56/) 602 84/4 Name of Contact Person Area Code & Daytime Telephone Number		
Maine of College Ferson Area Code & Daytime Telephone Mainter		
Enclosed is a \$35.00 check made payable to the Department of State.		

B# 40 ... A 3.5

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 2.09
in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation & FRIENDS of Fisher House Inc
2. The principal office address: 900 Oscaola Dr. Suite 3014
West PAIM Beach 1-1 33409
-3. The mailing address (if different):
4. Date of incorporation/qualification: 1998 Document number: NO900001213
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)
Denvis 1 Koehler Deceased 4/29/11
900 Oscola Dr Svite 107A
West PAIM Beach F1 33409
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Jersia AKlein SSE - m
900 Os reila Dr Suite 10 30 10 10 10 10 10 10 10 10 10 10 10 10 10
West Palm Beach FI 33409 500 5
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 olycer of director DOUGLAS L. PHIPPS 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 10/16/1) 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