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Florida Department of State  
Division of Corporations  
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To:  
Division of Corporations  
Fax Number : (850)617-6380

From:  
Account Name : ACCOUNT BOOKKEEPING CORP  
Account Number : I20120000055  
Phone : (407)898-1757  
Fax Number : (407)897-5336

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address: CUSTOMER@ABKCORP.COM

SECRETARY OF STATE  
TALLAHASSEE, FL

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REGISTERED AGENT CHANGE  
ART IS LIFE FOUNDATION INC.

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COVER LETTER

TO: Amendment Section  
Division of Corporations

NAME OF CORPORATION: ART IS LIFE FOUNDATION INC

DOCUMENT NUMBER: N09000002271

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

JOSE ALBERTO LEMUS

(Name of Contact Person)

ACCOUNT BOOKKEEPING CORP

(Firm/ Company)

5301 CONROY ROAD SUITE 140

(Address)

ORLANDO, FL 32811

(City/ State and Zip Code)

CUSTOMER@ABKCORP.COM

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

For further information concerning this matter, please call:

JOSE ALBERTO LEMUS

407-898-1757

(Name of Contact Person)

at (Area Code) (Daytime Telephone Number)

Enclosed is a check for the following amount made payable to the Florida Department of State:

- |   |  |   |  |
|---|--|---|--|
| <input checked="" type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certified Copy<br>(Additional copy is<br>enclosed) | <input type="checkbox"/> \$52.50 Filing Fee<br>Certificate of Status<br>Certified Copy<br>(Additional Copy is<br>Enclosed) |
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Mailing Address

Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Street Address

Amendment Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

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SECRETARY OF STATE  
TALLAHASSEE, FL

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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: ART IS LIFE FOUNDATION INC
2. The principal office address: 1058 NORTH TAMiami TRAIL, 1058 NORTH TAMiami TRAIL  
SARASOTA, FL 34236
3. The mailing address (if different): \_\_\_\_\_
4. Date of incorporation/qualification: 03/06/2009 Document number: N09000002271
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)

JEREMIAH BARBOSA JUNIOR

1058 NORTH TAMiami TRAIL, 1058 NORTH TAMiami TRAIL

SARASOTA, FL 34236

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

ADILSON GONCALVES DOS ANIOS

1058 NORTH TAMiami TRAIL, 1058 NORTH TAMiami TRAIL

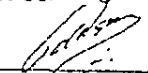
P.O. Box NOT acceptable

SARASOTA, FL 34236

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TALLAHASSEE, FL

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

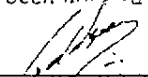
Such change was authorized by resolution duly adopted by its board of directors or by an officer so  
authorized by the board, or the corporation has been notified in writing of the change.

  
Signature of officer or director

PRESIDENT

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

11/06/2024

Date

If signing on behalf of an entity:

\_\_\_\_\_  
Typed or Printed Name