(Requestor's Name) (Address)	
(Address)	200254931622
(City/State/Zip/Phone #)	12/23/1301011010 **43.75
(Business Entity Name) (Document Number)	ALL AN IL
Certified Copies Certificates of Statu Special Instructions to Filing Officer:	

C. Lewis



FLORIDA DEPARTMENT OF STATE Division of Corporations

January 2, 2014

KENNETH W. BALDWIN / DEAR AMERICAN WOMAN NETWORK INC 750 NE 199TH STREET (H201) MIAMI, FL 33179 US

SUBJECT: DEAR AMERICAN WOMAN NETWORK, INC. Ref. Number: N10000005027

We have received your document for DEAR AMERICAN WOMAN NETWORK, INC. and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

You filled out the form for an Alien Business Organization. Your company is a Florida non-profit. Please fill out the enclosed form.

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Carolyn Lewis Regulatory Specialist II

Letter Number: 314A0000065



www.sunbiz.org Division of Corporations - P.O. BOX 6327 -Tallahassee, Florida 32314

COVER LETTER

TO: Amendment Section Division of Corporations

Dear American Woman Network SUBJECT:

DOCUMENT NUMBER: <u>N1000005027</u>

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:

Kenneth w. Baldwin-Name of Contact Person Dear American Woman Network Firm/Company 750 NE 199 th Street (H201) Miami Florida 33179 City/State and Zin Code

<u>GKOWLESSAR</u> <u>G</u> <u>GMAIL</u> - <u>Com</u> E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Georgia Kowlessar at (954) 548-4796 Name of Contact Person 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 (03/12)

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 $\frac{\Gamma - L_0 \wedge d_0}{L_0}$ in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Dear American Woman Network, InC.
2. The principal office address: 750 NE 199th Street (H201)
Miami, Florida 33179
3. The mailing address (if different):
4. Date of incorporation/qualification: <u>5/24/2010</u> Document number: <u>N10000005027</u>

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)

ege/ & Utrera 22 nd Street (4th Floor) MIAMI F.P. 33145

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

Georgia Kowlessar South Divie Highway (203 P.O. Box NOT acceptible No Beach F-lorida 33060 Kompeno

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.

Kenneth W. Baldwin (President) Printed or typed name and title enneth w.

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 configm that the corporation has been notified in writing of this change.

te of Refiste Agent If signing on behalf of an entity:

1/16/14 Date

yped or Printed

* * * 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 (03/12)