

N11000004137

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MAY 20 2011

R-A. Chorge
C.COULLIETTE

MAY 25 2011

EXAMINER

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Cancer Kure Foundation Corp
Name of Corporation

DOCUMENT NUMBER: N11000004137

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:

Kortni Keckler
Name of Contact Person

Cancer Kure Foun dation Corp
Firm/Company

88 S. Ocean BLVD 7B
Address

Delray Beach, FL 33483 US
City/State and Zip Code

cancerkure@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Kortni Keckler at (561) 2835674
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
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 in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Cancer Kure Foundation Corporation
2. The principal office address: 2515 S. Coral Trace Dr. Delray Beach FL, 33445 US
3. The mailing address (if different): 2515 S. Coral Trace Dr. Delray Beach FL, 33445 US
4. Date of incorporation/qualification: 4/26/2011 Document number: N11000004137
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)

Kortni E Keckler

88 S. Ocean BLVD 7B

Delray Beach, FL 33483 US

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

Kortni E Keckler

2515 S. Coral Trace DR.

P.O. Box NOT acceptable

Delray Beach, FL 33445 US

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]
Signature of an officer or director

Kortni E. Keckler
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]
Signature of Registered Agent

05/04/2011
Date

If signing on behalf of an entity:

Kortni E. Keckler
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)

11 MAY 20 PM 12:10

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DIVISION OF CORPORATIONS