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C. GOLDEN

JUL - 5 2017

CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Tallhassee, FL 32301 Phone: 850-558-1500

Phone: 850-5	558-1500						
	ACCOUNT NO. : 12000000195						
	REFERENCE : 707914 7641007						
	AUTHORIZATION Spells of a popular						
	COST LIMIT : \$35.00						
ORDER DATE :	June 30, 2017						
ORDER TIME :	11:02 AM						
ORDER NO. :	707914-005						
CUSTOMER NO:	7641007						
CHANGE OF AGENT							
NAME :	DAVID AND LESLIE KANTOR FAMILY FOUNDATION, INC.						

CONTACT PERSON: Melissa Zender -- EXT#

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

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EXAMINER:

COVER LETTER

TO:	Amendment Section Division of Corporations
	David and Leslie Kantor Family Foundation, Inc.
SORI	Name of Corporation
	N11000011666
DOC	EMENT NUMBER:
The er	iclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.
Please	return all correspondence concerning this matter to the following:
	Jarnes R. Office, Esq.
	Name of Contact Person
	Firm/Company
	400 Victory Drive
	Address
	Springboro, OH 45066
	City/State and Zip Code
	jimo@vwg.com
	E-mail address: (to be used for future annual report notification)
For fu	ther information concerning this matter, please call:
Jim (
	Name of Contact Person at () Area Code & Daytime Telephone Number
Enclos	sed is a \$35.00 check made payable to the Department of State.
	Mailing Address: Amendment Section Division of Corporations Street Address: Amendment Section Division of Corporations
	P.O. Box 6327 Clifton Building
	Tallahassee, FL 32314 2661 Executive Center Circle

Tallahassee, FL 32301

CR2E045 (03/12)

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of change is s	ons of sections 607.0502, 6 submitted for a corporation	organized under the	e laws of the State of	Florida	
in order to cho	inge its registered office or	registered agent, or	both, in the State of	`Florida.	
I. The name of the corp	David and Lesl	lie Kantor Family	Foundation, Inc.		
2. The principal office a	CAOAL a Laa Da	oad, Boca Raton	, FL 33496		
z. the presciper of the a	/vvar				
2. The mailing address ((if different);				
4. Date of incorporation	12/20/20 n/qualification:	11 Docum	N1100 ent number:	00011666	
5. The name and street a	address of the current regis of State: (If resigned, enter	tered agent and regis			
NRAI	Services, Inc.			- G	
1200	1200 South Pine Island Road				
Planta	ation, FL 33324				
6. The name and street a	Plantation, FL 33324 I street address of the new registered agent (if changeti) and /or registered office Corporation Service Company				
Согра	oration Service Comp	any		, citor	
1201	Hays Street			~ (
Tallah	e.o e nassee, FL 32301-252	tox NOT acceptable		e-	
The street address of its as changed will be iden	s registered office and the nical.	street address of the	e husiness affice of i	its registered agent,	
Such change was autho	orized by resolution duly a	dopted by its board een notified in writi	of directors or by an	nofficer so	
Caya A	Karlot	David A. I	Kantor Printed or typed harrie and to		
Significated and I hereby accept the application of	to intiment as registered agoly with the provisions of a less, and I am familiar with ment is being filed merely; corporation has been not Chelsey Ma	ent and agree to ac all statutes relative to and accept the obli- to reflect a change tified in writing of th	t in this capacity. o the proper and co- igation of my positio	mplete on as registered	
Signature of S	Acct Vice Pre		Ct 30 1		
If signing on behalf of a	an entry				
Timed or Pri	intra Name				

* * * FILING FEE: \$35.00 * * *

MAKE CHECKS PAYABLE TO FLORIDA DEPAREMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (63/42)

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