N12000006180

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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S. TALLENT
OCT 20 2016

FILED
16 OCT 18 AM 10:25
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

R/A-CH

FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 3, 2016

STEVEN PICKETT
DOMYLLC.COM, LLC
5716 CORSA AVE SUITE 110
WESTLAKE VILLAGE, CA 91362

SUBJECT: MICHEL & CLAIRE GUDEFIN FAMILY FOUNDATION, INC.
Ref. Number: N12000006180

We have received your document and check(s) totaling $35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The registered agent must sign accepting the designation.

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.

Susan Tallent
Regulatory Specialist II

Letter Number: 916A00021152

16 OCT 18 AM 12:33

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Michel & Claire Gudefin Family Foundation, Inc.
Name of Corporation

DOCUMENT NUMBER: N12000006180

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:

Steven Pickett
Name of Contact Person

DoMyLLC.com, LLC
Firm/Company

5716 Corsa Ave Suite 110
Address

Westlake Village, CA 91362
City/State and Zip Code

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

For further information concerning this matter, please call:

Steven Pickett on behalf of DoMyLLC.com, LLC at (888) 366-9552
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

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 Florida *in order to change its registered office or registered agent, or both, in the State of Florida.*

1. The name of the corporation: Michel & Claire Gudefin Family Foundation, Inc.

2. The principal office address: 1063 Spanish Moss Trail, Naples, FL 34108

3. The mailing address (if different):

4. Date of incorporation/qualification: 06/21/2012 Document number: N12000006180

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)

Nrai Services, Inc

1200 South Pine Island Road

Plantation, FL 33324

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

InCorp Services, Inc. ✓

17888 67th Court North

P.O. Box NOT acceptable

Loxahatchee, FL 33470

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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 officer or director

Christine Villas-Boas, Pres.
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

September 15, 2016
Date

If signing on behalf of an entity:

Steven Pickett on behalf of Incorp Services, Inc.
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 (03/12)