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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 : (614)280-3338 : (954)208-0845 Fax Number

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

Email Address:

REGISTERED AGENT CHANGE THE ZANMI BENI FOUNDATION, INC.

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JUN 1 7 2019

Electronic Filing Menu

Corporate Filing Menu

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

Pursiont 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: The Zanmi Beni Foundation, Inc. 2. The principal office address: 6201 Riviera Drive
Corol Cobles El 22446
3. The mailing address (if different):
4. Date of incorporation/qualification: 03/12/2013 Document number: N13000002394
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)
RAX Co.
50 North Laura Street, Suite 3300
Jacksonville, FL 32202
i. The name and street address of the new registered agent (if changed) and for registered office (if changed):
C T Corporation System 三次
1200 South Pine Island Road P.O. Box, NOT acceptable
P.O. Box NOT acceptable
Plantation, FL 33324
he street address of its registered office and the street address of the business office of its registered agent, a changed will be identical.
uch change was authorized by resolution duly adopted by its board of directors or by an officer so uthorized by the heard, or the corporation has been notified in writing of the change.
Jennie Welss Block, Director
hereby accept the appointment as registered ovent and agree to act in this capacity further agree to comply with the provisions of all statutes relative to the proper and complete or furmance of my dulies, and I am familiar with and occept the obligation of my position as registered gent. Or, if this document is being flad merely to reflect a change in the registered office address, I greby confirm that the corporation has been notified in writing of this change.
Modor Cuddle 6-14-19 Blighalure of Registered Agains Date
signing on behalf of an entity: Madonna Cuddihy
Assisfant Secretary 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, PL 32314 CR25045 (03/12)