

N130000 10513

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

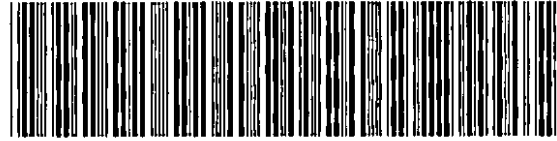
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SEP 20 2017

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17 SEP 20 AM 12:14

R/A-CH

FILED
17 SEP 20 AM 11:00

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Jane and John Marks Foundation, Inc.
Name of Corporation

DOCUMENT NUMBER: N13000010513

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:

John Marks, III

Name of Contact Person

Jane and John Marks Foundation, Inc.

Firm/Company

215 E. Virginia Street

Address

Tallahassee, FL 32301

City/State and Zip Code

john@marksandmarksllc.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Kim Loebig

Name of Contact Person

850 510-2702

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: Jane and John Marks Foundation Inc
2. The principal office address: 215 E. Virginia Street, Tallahassee, FL 32301

3. The mailing address (if different): _____

4. Date of incorporation/qualification: 11/20/2013 Document number: N13000010513

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)

John Marks, III
200 West College Avenue, Suite 226
Tallahassee, FL 32301

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

John Marks, III
215 E. Virginia Street
Tallahassee, FL 32301

P.O. Box NOT acceptable

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

John Marks III, Chairman

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

9/20/17

Date

If signing on behalf of an entity:

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)

FILED
17 SEP 20 AM 11:00
TALLAHASSEE, FLORIDA
DIVISION OF CORPORATIONS