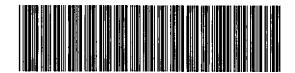
## N14000002702

(Re	equestor's Name)	
(Ac	idress)	<u>.</u>
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	s of Status
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TA APR -4 AMIN: 58

PACM8 04110.14

## **COVER LETTER**

TO: Amendment Section Division of Corporations
SUBJECT: United For Compassion Fun Raising Name of Corporation Corporation
DOCUMENT NUMBER: N 14 0000 2702
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:
Sandru Hock Name of Contact Person
High Country Tax : Accounting
P.O Box 4709  Address
Di)lon, CO 80435 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Sandra Hock at (321) 693-4165  Name of Contact Person at (321) 693-4165  Area Code & Daytime Telephone Number
Enclosed is a \$35.00 check made payable to the Department of State.
Mailing Address:  Amendment Section  Street Address:  Amendment Section

**Division of Corporations** 

Tallahassee, FL 32301

2661 Executive Center Circle

Clifton Building

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

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

Fursuant 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: United For Compassion Fun Rais  2. The principal office address: Corporation
4300 Deerwood Trail, Melbourne, FL 329.
3. The mailing address (if different): \(\frac{1}{A}\) / A
4. Date of incorporation/qualification: 3-18-14 Document number: N140000 270
5. The name and street address of the <u>current</u> registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)
Joseph Pritchett
4300 Deerwood Trail
Melbourne FL 3293H
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Amanda Rosiev =
4300 Deerwood Trail
P.O. Box NOT acceptable
MEIBOURNE FL 3273T
The street address of its registered office and the street address of the business office of its registered agents 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.
X ( Interest to see on Pritchett
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
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.
x191200 9/2/14
Signature of Registered Agent  Analysis  If signing on behalf of an entity:
Amandarosiev

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

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