

N15 000002708

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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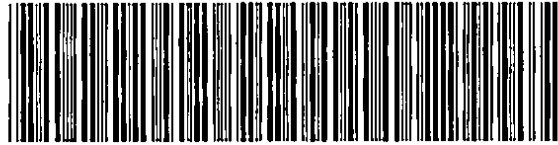
(Business Entity Name)

(Document Number)

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Hershorin Schiff Community Day Schools of Tomorrow, Inc
Name of Corporation

DOCUMENT NUMBER: N15000002708

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:

Carrie Kashawlic

Name of Contact Person

Community Day School

Firm/Company

1050 S Tuttle Ave

Address

Sarasota, Florida 34237

City/State and Zip Code

ckashawlic@communityday.org; jglassmoyer@communityday.org

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

For further information concerning this matter, please call:

Carrie Kashawlic

Name of Contact Person

at (941)

552 2770

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
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

**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: HERSHORIN SCHIFF DAY SCHOOLS OF TOMORROW, INC.

2. The principal office address: 1050 S Tuttle Ave Sarasota, Florida 34237

3. The mailing address (if different); same

4. Date of incorporation/qualification: 03/16/2015 Document number: N15000002708

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)

Josh Dell

1626 Ringling Blvd Suite 300

Sarasota, Florida 34236

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

Josh Dell c/o Garcia Dell

1819 Main Street Suite 300

P.O. Box NOT acceptable

Sarasota, Florida 34236

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

Daniel Ceaser, Head of School

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

Date _____

If signing on behalf of an entity:

Josh Dell

Typed or Printed Name

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

MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

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