NILe598

(Red	questor's Name)			
(Add	dress)	· <u> </u>		
,	,			
	<del>,</del> ,			
(Add	dress)			
(City	//State/Zip/Phone	e #)		
	WAIT	MAIL		
	inoco Entitu Non			
(Bus	siness Entity Nar	ne)		
(Document Number)				
Certified Copies	Certificates	s of Status		
·····	<u> </u>			
Special Instructions to I	Filing Officer			

300385139713

2022 APR -5 PH 3: 42

Office Use Only

CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

**•** •

ACCOUNT NO. : I2000000195

REFERENCE : 571945

AUTHORIZATION

**,** 8363681 nelleman COST LIMIT : \$ 35.00

ORDER DATE : March 25, 2022

ORDER TIME : 2:08 PM

ORDER NO. : 571945-010

CUSTOMER NO: 8363681

:

CHANGE OF AGENT

NAME: SUNRISE COMMUNITY FOUNDATION, INC.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

\_ CERTIFIED COPY XX PLAIN STAMPED COPY

CONTACT PERSON: Alexxis Weiland -- EXT#

EXAMINER:

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

1. The name of the corporation: SUNRISE COMMUNITY FOUNDATION, INC.

2. The principal office address: 9040 SUNSET DRIVE MIAMI, FL 33173

3. The mailing address (if different): \_\_\_\_\_

Document number: N16598 4. Date of incorporation/qualification: \_\_\_\_09/02/1986

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)

Tallahassee FL 32301	1201 Hays Street		
		FL 32	301
		<u> </u>	

Wray, Zachary			
9040 Sunset Drive			
	P.O. Box NOT acceptable		
Miami	FL	33173	

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.

nature of an officer

6. The name

Jill Cilmi, Vice President Printed or typed name and title

I here by 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

3/29/2022

If signing on behalf of an entity:

Zachary Wra Typed or Printed I

\* \* \* 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 (04/13)