

N17000004799

(Requestor's Name)

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(Business Entity Name)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

AUG 23 2017

S. YOUNG



## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Finding a Lost Voice Foundation, Inc  
Name of Corporation

**DOCUMENT NUMBER:** N17000004799

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:

Rachel Needle

Name of Contact Person

Firm/Company

5 Harvard Circle Suite 109

Address

West Palm Beach, FL 33409

City/State and Zip Code

drachelneedle@gmail.com

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

For further information concerning this matter, please call:

Rachel Needle

Name of Contact Person

at ( 561 ) 262-4723

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: Finding a Lost Voice Foundation, Inc
2. The principal office address: 5 Harvard Circle Suite 109  
West Palm Beach, Fl 33409
3. The mailing address (if different): \_\_\_\_\_
4. Date of incorporation/qualification: 5/3/17 Document number: N17000004799

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)

Jordan D Meyers

21277 Hazelwood Lane

Boca Raton, Fl 33428

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

5 Harvard Circle Suite 109

West Palm Beach, Fl 33409

P.O. Box NOT acceptable

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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

Jordan D Meyers

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.*

Rachel Needle  
Signature of Registered Agent

8/16/17  
Date

If signing on behalf of an entity:

Rachel Needle  
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)