

N 20 000000 1257

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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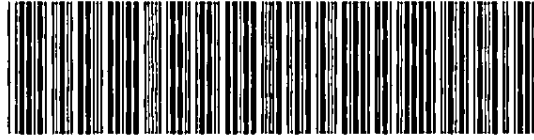
(Business Entity Name)

(Document Number)

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C. BRUMBLEY  
DEC 13 2021

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Ali-Tutor Global Foundation, Inc.  
Name of Corporation

**DOCUMENT NUMBER:** N20000001257

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:

Cynthia H. Sinclair

Name of Contact Person

Ali-Tutor Global Foundation, Inc.

Firm/Company

4783 Palermo Court NE

Address

St. Petersburg, FL 33703

City/State and Zip Code

cynthia.sinclair@earthlink.net

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

For further information concerning this matter, please call:

Cynthia Sinclair at ( 727 ) 318-2343  
Name of Contact Person 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: Ali-Tutor Global Foundation, Inc.

2. The principal office address: 4783 Palermo Court NE, St. Petersburg, FL 33703

3. The mailing address (if different): N/A

4. Date of incorporation/qualification: January 28, 2020 Document number: N20000001257

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)

KATZ, RICHARD A  
1800 BEN FRANKLIN DR - UNIT 910B  
SARASOTA, FL 34236

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

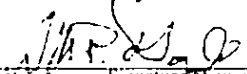
Cynthia H. Sinclair  
4783 Palermo Ct NE  
St. Petersburg, FL 33703

P.O. Box NOT acceptable

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STATE OF FLORIDA  
TALLAHASSEE, FL

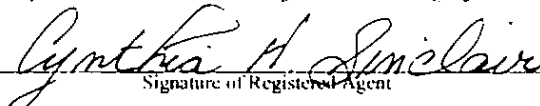
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

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

William P. Doyle, CTO.  
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

November 18, 2021  
Date

If signing on behalf of an entity:

Cynthia H. Sinclair  
Typed or Printed Name

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