## Na0335

(	Requestor's Name)	•
(,	Address)	
	Address)	
·	,	
(1	City/State/Zip/Phone #)	
PICK-UP	☐ WAIT	MAIL
	Business Entity Name)	<u></u>
· ·	Business Entry Name,	
(	Document Number)	
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T. LEMIEUX

## **COVER LETTER**

TO: Amendment Section Division of Corporations

N20335

DOCUMENT NUMBER:

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:

Name of Contact Person

Firm/Company

4603 Wishart Blvd

Address

Tampa, FL 33603

City/State and Zip Code

mrsybor@verizon.net

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

For further information concerning this matter, please call:

Mary Alvarez 813 873-

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
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this inge is submitted for a corporation organized under the laws of the State of <mark>Florida</mark> r to change its registered office or registered agent, or both, in the State of Florida.
1. The name of t	the corporation: Ybor City Rotary Foundation, Inc.
2. The principal	office address: 4603 Wishart Blvd
	Tampa, FL 33603
3. The mailing a	address (if different):
4. Date of incorp	poration/qualification: 04/24/1987 Document number: N20335
	d street address of the current registered agent and registered office on file with the rtment of State: (If resigned, enter resigned)
	Jose R. Alfaras
	2713 W. Woodlawn Ave
	Tampa, FL 33607
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):	
	Mary Alvarez
	4603 Wishart Blvd
	P.O. Box NOT acceptable Tampa, FL 33603
The street address changed will	ess of its registered office and the street address of the business office of its registered agent, be identical.
Such change wa	as authorized by resolution duly adopted by its board of directors or by an officer so he board, or the corporation has been notified in writing of the change.
Signati	ure of an officer or director  TEIDI HESS DIRECTOR  Printed or typed name and title
I hereby accept I further agree performance of agent. Or, if th hereby confirm	the appointment as registered agent and agree to act in this capacity. to comply with the provisions of all statutes relative to the proper and complete my duties, and I am familiar with and accept the obligation of my position as registered its document is being filed merely to reflect a change in the registered office address, I that the corporation has been notified in writing of this change.
Mary	mature of Registered Agent Date  Date  Date
If signing on be	chalf of an entity:
MARY	Typed or Printed Name

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