

N2100C00 9554

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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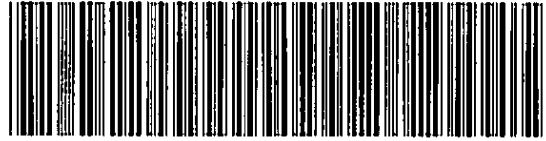
(Business Entity Name)

(Document Number)

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## COVER LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: Urban Youth Legacy Foundation Inc  
Name of Corporation

DOCUMENT NUMBER: N21000009854

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.

Loretta Wood  
Name of Contact Person

Urban Youth Legacy Foundation  
Firm/Company

2823 N. Australian Ave  
Address

West Palm Beach FL 33407  
City/State and Zip Code

LWood@urbanyouthimpact.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Loretta Wood at 561 832 9220  
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: Urban Youth Legacy Foundation Inc
2. The principal office address: 2823 N. Australian Ave  
West Palm Beach, FL 33407
3. The mailing address (if different): \_\_\_\_\_
4. Date of incorporation/qualification: 8/16/21 Document number: N21000009854
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)

Natalie O'Hara  
4728 Lakeside Circle, West Palm Beach, FL 33407  
Resigned

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

William T. Hobbs  
4452 N San Andros  
P.O. Box NOT acceptable  
West Palm Beach, FL 33411-5571

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.

B. M. McPherson  
Signature of an officer or director

Brian McPherson  
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.

William T. Hobbs  
Signature of Registered Agent

MAY 31, 2022  
Date

If signing on behalf of an entity:

Brian M. McPherson  
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 (04/13)