

1/11

N22000004400

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



500439502165

11/21/24--01007--022 \*\*35.00

FILED  
2024 NOV 21 PM 3:14  
SECRETARY OF STATE  
TALLAHASSEE, FL

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Friends of the Haver Foundation Inc  
Name of Corporation

**DOCUMENT NUMBER:** N22000004400

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:

Tamas Doffek

Name of Contact Person  
Braunfeld Associates LLC

Firm/Company  
1815 Purdy ave

Address  
Miami Beach FL 33139

City/State and Zip Code  
tamas@doffek.com

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

For further information concerning this matter, please call:

Tamas Doffek at (786) 3299066  
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 \_\_\_\_\_ in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Friends of the HAVER Foundation Inc.  
1815 Purdy Ave Miami Beach FL 33139

2. The principal office address: \_\_\_\_\_

3. The mailing address (if different): \_\_\_\_\_  
05/04/2022 Document number: N22000004400

4. Date of incorporation/qualification: \_\_\_\_\_  
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)

UNITED STATES CORPORATION AGENTS, INC.

476 RIVERSIDE AVE. JACKSONVILLE, FL 32202

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

Braunfeld Associates LLC

1815 Purdy Ave Miami Beach FL 33139

P.O. Box NOT acceptable


SECRETARY OF STATE  
TALLAHASSEE, FL

2024 NOV 21 PM 3:14

FILING

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

Tamas Doffek, managing partner

\_\_\_\_\_  
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

11/06/2024

\_\_\_\_\_  
Date

If signing on behalf of an entity:

Braunfeld Associates

\_\_\_\_\_  
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)