

N50382

Florida Department of State
Division of Corporations
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Fax Number : (850) 617-6380

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Account Name : SHUTTS & BOWEN LLP OPERATING ACCOUNT
Account Number : I20030000037
Phone : (561) 835-8500
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REGISTERED AGENT CHANGE

THE COOPER FAMILY FOUNDATION, INC.

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**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: THE COOPER FAMILY FOUNDATION, INC.
2. The principal office address: 315 WEST 39RD STREET, APT. 9M, C/O COOPER FAMILY OFFICE
NEW YORK NY 10001
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 08/14/1992 Document number: N50382
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

DAVID A. GART, ESQ. c/o Shutts & Bowen250 AUSTRALIAN AVE SOUTH, Suite 500WEST PALM BEACH FL 33401 US

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

CORPORATION COMPANY OF MIAMI (dag)525 Okeechobee Blvd., Suite 1100

(P.O. Box NOT acceptable)

West Palm Beach, Florida 33401

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]
(Signature of an officer or director)

[Signature]
(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]
(Signature of Registered Agent)

8.1.08
(Date)

If signing on behalf of an entity:

ARTHUR J. MENOR

(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

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