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T. LEIMIEUX

COVER LETTER

TO: Amendment Division of	Section Corporations	
SUBJECT:	THE A.L. LEVINE FAMIL	
	Name of 0	Corporation
DOCUMENT NUM	1BER:	0004947
		ce/Agent and fee are submitted for filing.
Please return all corr	respondence concerning this matt	er to the following:
		<u> </u>
	Carole Ann Steiger	
_		ontact Person
	The A.L. Levine Famil	y Foundation, Inc.
_	Firm/C	Company
	41 Hampshire Lane	
	A d	dress
	Boynton Beach, Florid	
_	01. 70.	
	City/State a	and Zip Code
Ē	carjoel@aol.com E-mail address: (to be used for	future annual report notification)
For further informati	ion concerning this matter, please	call:
Carole Ann St	eiger	at (561) 737–2999 Area Code & Daytime Telephone Number
Name	e of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a \$35.00	check made payable to the Depa	rtment of State.
	Mailing Address:	Street Address:
	Amendment Section	Amendment Section
	Division of Corporations P.O. Box 6327	Division of Corporations Clifton Building
	Tallahassee, FL 32314	2661 Executive Center Circle
	, ·	Tallahassee, FL 32301

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

statement of che	ange is submitted for a	a corporation organize	607.1508, or 617.1508, Floria ed under the laws of the State o ed agent, or both, in the State o	of Florida	-	
1. The name of	the corporation:	The A.L. Levin	ne Family Foundation,	Inc.		
2. The principal	l office address: 4	l Hampshire Lane	e, Boynton Beach, Flo	rida 33436		
3. The mailing a	address (if different):_					
4. Date of incor	poration/qualification	:10/7/94	Document number: _ N940	00004947		_
		current registered age signed, enter resigned)	nt and registered office on file	with the		
	Howard K	. Coates, Jr., l	Esq.			
	McDonald	Hopkins, LLC				
	505 Sout	h Flagler, Drive	e, Ste. 300	_		
6. The name and (if changed):	d street address of the	m Beach, Florida new registered agent (Steiger, Regist	(if changed) and /or registered	JEORETA TALLAHA	15 FEB 27 PM	,
	41 Hampshir			TARY OF	7 PM	TIL EU
		P.O. Box NOT acc	•	FL(
	Boynton Bea	ch, Florida 334	36	ORID.	35	
The street address changed will	ess of its registered of be identical.	ffice and the street add	dress of the business office of	f its registered age	ent,	
			y its board of directors or by a ed in writing of the change.	an officer so		
ande	Any Ster		Carole Ann Steiger, Printed or typed name and	President	_	
I hereby accept I further agree of performance of agent. Or, if th	the appointment as r to comply with the pr my duties, and I am f is document is being f that the corporation	ovisions of all statute. familiar with and acce	gree to act in this capacity. s relative to the proper and c ept the obligation of my posity a change in the registered of	omplete ion as registered		
Sig Carole Ann	nature of Registered Agent		Date		_	
	yped or Printed Name					

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

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