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DOCUMENT # N94000006301

FILED
Jun 08, 2000 8:00 am
Secretary of State

1. Entity Name

BRANCHES OF LOVE, INC.

Principal Place of Business	Mailing Address
12951 S. CALUSA CLUB DRIVE MIAMI FL 33186	12951 S. CALUSA CLUB DRIVE MIAMI FL 33186-2345

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0545854 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
BONNER, ESPERANZA M 12951 S. CALUSA CLUB DRIVE MIAMI FL 33186	Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida.

SIGNATURE ______________________
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS $61.25

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10.	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D MILLON, ESPERANZA 1242 THRUSH AVENUE MIAMI SPRINGS FL 33166 ☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Raul Tenorio 12814 SW 119 Terr. Miami Fl 33186 ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D BONNER, ESPERANZA M 12951 S. CALUSA CLUB DRIVE MIAMI FL 33186 ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D YOUNG, MIRYAM 3550 NW 59 AVE MIAMI FL ☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D William Roldan 12911 S. Calusa Club Dr. Miami Fl 33186 ☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D JARAMILLO, ALICIA 13011 S CALUSA CLUB DR MIAMI FL ☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D ANA Tenorio 12814 SW 119 Terr. Miami Fl 33186 ☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	6/8 ☐ Change ☐ Addition

CR2E017 (1/00)

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: SIGNATURE REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #