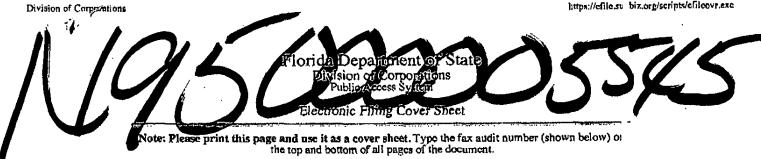
: (850)617-6380

1 110432003053 (661)694-8107 1 (561)694-1639

: CORPORATE CREATIONS INTERNATIONAL INC.



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## REGISTERED AGENT CHANGE

NATIONAL OVARIAN CANCER COALITION, INC.

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## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT $\bigcirc$ R BOTH FOR CORPORATIONS

Pursuant to the provisions of section 607.0502, 617.0502, 607.1508, or 617.1508, Florida Si nutes, 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.

I. The name of the corporation is: National Ovarian Cancer Coalition Inc.	
2. The principal office address: 4900 Hopyard Rd. Ste 100	
Pleasanton CA 94588	<u></u> -
3. The mailing address (if different):	<u></u>
4. Date of incorporation/qualification: 11/22/1995 Document Number: N950000 05545	
5. The name and street address of the current registered agent and registered office on file with the	
. Florida Department of State:	-19
Florida Department of State:  STEVEN, GARELLEK ESQ.  700 S. FEDERAL HWY STE 200  BOCA RATON FL 33432  6. The name and street address of the new registered agent (if changed) and /or registered of the second secon	71
700 S. FEDERAL HWY STE 200	
BOCA RATON FL 33432	١,
6. The name and street address of the new registered agent (if changed) and /or registered of the (if changed):	, ,
Corporate Creations Network Inc.	<u>,</u>
11380 Prosperity Farms Road #221E	,
(P.O. Box Not acceptable)	8
Palm Beach Gardens FL 33410	_
The street address of its registered office and the street address of the business office of it; register agent, as changed will be identical.	ed
Such change was authorized by resolution duly adopted by its board of directors or by an officer authorized by the board, or the corporation has been notified in writing of the change.	so
by S. Simons as attorney-in-fact (Signature of an officer or director)  (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 an complete performance of my dutics, 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	d
hereby confirm that the corporation has been notified in writing of this change.	
(Signature of Reignmered Agent) (Date)	_
If signing on behalf of an entity:	
Samantha Simons, Assistant Secretary (Typed of Printed Name)	

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 12314

Corporate Creations International Inc. 11380 Prosperity Farms Road #221E Palm Beach Gardens FL 33410 (561) 694-8107